

NESTLÉ IMPLEMENTATION OF THE WHO CODE
(International Code of Marketing of Breast-milk Substitutes)

OFFICIAL RESPONSE OF GOVERNMENTS

REPORT TO THE DIRECTOR-GENERAL
WORLD HEALTH ORGANIZATION

July, 1999

00011
CPHE

Community Health Cell

Library and Documentation Unit

367, "Srinivasa Nilaya"

Jakkasandra 1st Main'

1st Block, Koramangala,

BANGALORE-560 034.

Phone : 5531518

NESTLÉ IMPLEMENTATION OF THE WHO CODE
(International Code of Marketing of Breast-milk Substitutes)
OFFICIAL RESPONSE OF GOVERNMENTS

REPORT TO THE DIRECTOR-GENERAL
WORLD HEALTH ORGANIZATION

July, 1999

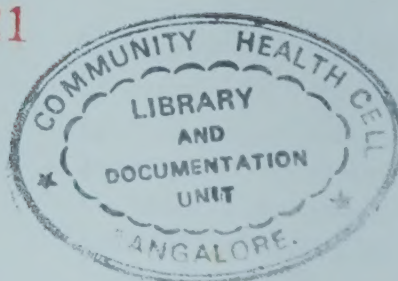
for lib
Jw
7/2/99

WESTLE IMPLEMENTATION OF THE WHO CODE
(International Code of Marketing of Breast-milk Substitutes)
OFFICIAL RESPONSE OF GOVERNMENTS

REPORT TO THE DIRECTOR-GENERAL
WORLD HEALTH ORGANIZATION

CH-110 N99

06021



Nestlé Implementation of the WHO Code

Contents

	<u>Page</u>
• Executive Summary	E-1
<u>Report</u>	
• Introduction	1
• Governments as the Final Authority in Defining the Code in Each Country	1
• Criterion Used for Self-Monitoring	2
• Summary of Code Implementation by Governments and by Nestlé	2
• Nestlé Current Monitoring Process with Governments	3
• Government Response to Nestlé	5
• Commentary on the Results to Date	5
• Conclusions and Ways to Strengthen the Current Approach	8

Table and Exhibits

• Table 1	9
• Exhibit 1 (Sample of letter to Government)	4
• Exhibit 2 (The Nestlé Instructions)	21
• Country Index (Latin America and Caribbean)	52
• Country Index (Africa)	75
• Country Index (Asia and Oceania)	100
• Country Index (Middle East)	116
• Country Index (Europe)	132

NESTLÉ IMPLEMENTATION OF THE WHO CODE: OFFICIAL RESPONSE FROM GOVERNMENTS

EXECUTIVE SUMMARY

- This report contains results of a new monitoring process which Nestlé instituted with governments beginning in 1998.
- It includes official responses from 54 governments (or designated monitoring bodies) that verify Nestlé compliance with the International (WHO) Code of Marketing of Breast-milk Substitutes, as applied in their countries.
- It has been instituted in response to the WHO Secretariat's request at the May, 1998 World Health Assembly that companies strengthen monitoring of their own practices, as specified under Article 11.3 of the International (WHO) Code of Marketing of Breast-milk Substitutes.
- The process is based on Article 11.2 of the International Code, which states that "Monitoring the application of this Code lies with governments acting individually, and collectively through the World Health Organization".
- The criterion for monitoring is what each government approves and accepts as the implementation of the WHO Code in their country, in keeping with WHO Code Article 11.1, which gives responsibility for defining the Code to governments.
- In this newly instituted process, Nestlé has approached government health ministries to ask the government to inform Nestlé of any Code violations which need to be corrected. If there are, Nestlé proceeds to correct them. When the point has been reached where the government is in a position to confirm Nestlé's Code compliance, it is asked to do so in writing.
- The results of this process are contained in a compendium of letters and certificates verifying Nestlé compliance from 54 governments where the process has been completed.
- At this point in time, we are aware of only one letter from a government which indicates that Nestlé does not comply with the WHO Code, as applied in their country. Also, one of the 54 countries pointed out potential infant formula label changes which need to be made. We are in discussion with the Health Ministries of these countries to reach agreement on application of the Code.
- This monitoring process will continue forward, with current discussions with other governments brought to completion, and additional governments being approached. The process has been established as an ongoing effort to foster the application of the WHO Code in each country.
- Nestlé believes that the major area of improvement in the application of the WHO Code has to do with enforcement and the creation of government-sponsored monitoring bodies where all parties are represented, and we hope to further this objective in collaboration with the WHO Secretariat in the Director General's Forum process which was initiated in 1998.

Nestlé Implementation of the WHO CODE

(International Code of Marketing of Breast-milk Substitutes)

Introduction: Nestlé's Response to the WHO Secretariat

The present report has been prepared in response to stated requests by the WHO Secretariat at the 1998 WHO Executive Board and World Health Assembly, that infant food companies be more proactive in monitoring their own marketing practices. It is also in response to Article 11.3 of the International Code of Marketing of Breast-milk Substitutes (WHO Code), which says that:

"Independently of any other measures taken for implementation of this Code, manufacturers and distributors of products within the scope of this Code should regard themselves as responsible for monitoring their marketing practices according to the principles and aim of this Code, and for taking steps to ensure that their conduct at every level conforms to them."

While individual companies are urged to monitor their own practices, the responsibility to monitor the application of the WHO Code is assigned to governments, by Article 11.2:

"Monitoring the application of this Code lies with governments acting individually, and collectively through the World Health Organization as provided in paragraphs 6 and 7 of this Article."

Governments as the Final Authority in Defining the Code in Each Country

Article 11.1 of the International Code makes it clear that governments have final authority in deciding how the WHO Code should be applied in each country:

"Governments should take action to give effect to the principles and aim of this Code, as appropriate to their social and legislative framework, including the adoption of national legislation, regulations or other suitable measures."

Dr. Gro Harlem Brundtland recently reiterated and reinforced this defining role of governments, and the status of the WHO Code and subsequent resolutions as recommendations. This was contained in the following statement to advocacy and industry NGO's in meetings held on November 19-20, 1998:

Dr Gro Harlem Brundtland:

"And while on the topic of the Code and Assembly resolutions, I would like to say something very basic. Fundamental to the way WHO conducts its affairs are the recommendations it makes to its Member

States. This, as I'm sure you know, is done most frequently through the resolutions adopted by the World Health Assembly that encourage a particular course of public-health action. The Code, too, was adopted in the form of a recommendation.

The International Code and Assembly resolutions have the same force, the same value. In other words, neither the Code nor any resolution has a real impact and a lasting meaning unless countries implement them according to their national laws and practice.

Member States are sovereign; they may, if they choose, implement WHO's recommendations to the letter, they may actually go beyond these recommendations; or they may simply ignore them altogether. What we should all be striving for in this context is the translation of these recommendations, in all 191 Member States, into national policy and practice, based on WHO's principled, evidence-based public health stand."

Criterion Used for Self-Monitoring

In accordance with the International Code, the criterion used for self-monitoring in the current report is the International Code, as applied and defined by each country. In other words, the criterion is what the government endorses and accepts as the interpretation of the Code in that country. As detailed above, this is in accordance both with the International Code itself, as well as WHO's reinforcement of the sovereignty of governments and nature of WHO recommendations.

Summary of Code Implementation by Governments and by Nestlé

At the 1998 World Health Assembly, the WHO Secretariat reported that 159 governments had informed WHO of actions taken to implement the International Code, although many of the countries recognize the Code without translating it into a national code or similar national measure. Nestlé counts 106 countries which have implemented national measures (including directives, codes, and regulations) or have drafts of such measures in progress. Approximately 90% of Nestlé infant formula sales are in these countries.

In the period between 1981 and 1999, it is safe to say that the industrialized countries (including countries of the European Union, North America, Australia, New Zealand, and Japan) have all taken conscious decisions as to how to implement the International Code recommendations. In 1991, the European Union adopted the European Directive 91/321, which is the implementation of the International Code in Europe (see letter from government of Denmark, page 176). The governments of the United States and Canada have indicated that they take into account the Aim and Principles of the International Code in guiding health system policy, but have not decided (to date) to translate the International Code into specific national measures, such as a code or regulation. Japan has taken a similar approach.

In 1982, Nestlé took the (then) unprecedented step of instituting measures to implement the WHO Code in advance of national measures. Nestlé recognizes the International Code as a universal recommendation to all WHO member states. However, given the elevated public health concern about sanitary conditions in

developing countries and their impact on formula preparation, this important step was taken. Thus, in developing countries, Nestlé issued instructions which took each article of the International Code implementing them in concrete, operational terms. This was done in order to fill the gap until national codes could be developed.

These instructions were reviewed with WHO, UNICEF, and the Nestlé Infant Formula Audit Commission, under the direction of former United States Secretary of State, Senator Edmund S. Muskie, which audited Nestlé's infant food marketing practices from 1982 through 1991.

These instructions, together with the entire International Code, were published in 1982 as the Nestlé Instructions. Tens of thousand of copies were distributed to all health professionals in hospitals, clinics, and private practice with whom Nestlé had contact, and discussed at the individual level to explain our new, more restrictive policies. This communication has been carried out on an ongoing basis since the Instructions were published, and Nestlé is, in all probability, the largest single distributor of the International Code recommendations, outside of WHO itself.

IN 1996, these Instructions were reissued, together with a pocket-sized summary of the policies (The Nestlé Charter), and all Nestlé Companies in developing countries were instructed to review our instructions with the government to make sure that they were acceptable to the health ministry (or other relevant entity), and instructed our managers to continue to take into account all national measures (codes, etc.) which had been passed since 1982.

Nestlé's Current Monitoring Process with Governments

The following steps were followed with national governments in the current Nestlé self-monitoring process:

1. Nestlé approached health ministries to ask the governments to inform Nestlé of any violations of the WHO Code, as applied in their countries, which need to be corrected (See Exhibit 1 for a sample letter). The Nestlé Instructions (Exhibit 2; pages 21 to 51), where appropriate, were presented again to the government to assure that the government approved of our policies (or inform us if they did not), and the relevant government measures were referenced.
2. If the government was aware of any violations, or if they did not agree with a Nestlé policy in implementing the Code, it was asked to inform Nestlé, and the company proceeded to take corrective action.
3. When the point had been reached where the government was in a position to confirm Nestlé's Code compliance, it was asked to do so in writing.

As this process is in its first year, it has been instituted with a significant subset of the countries where Nestlé markets infant foods, and it will continue as an ongoing process in Nestlé's self-monitoring efforts with additional governments in the coming years. Subsequent updates of progress will be reported to WHO in the future.



Dr Hematram Yadav
 Chairman, Vetting Committee
 Ministry of Health Malaysia
 Tingkat 4, Blok E, Komplek Pejabat-Pejabat
 Jalan Dungun, Bukit Damansara
 50490 KUALA LUMPUR

AJN/csi/227-3

23.11.1998

YOUR REF:

OUR REF:

PETALING JAYA,

Dear Dr Yadav,

STATUS ON CODE COMPLIANCE

Nestle has taken very seriously its responsibility to market our Infant Formula products in accordance with the WHO Code, which is implemented in Malaysia through the Malaysian Code of Ethics for Infant Formula Products.

We would thus like to make sure that our practices conform with the Malaysian Code of Ethics.

In this respect, we would like you to inform us if, in your judgement, Nestle is in compliance with the Malaysian Code of Ethics. We do this not only to make sure that what we are doing is right, but also to take, corrective action, if necessary.

Hence, please let us know of any current practices of Nestle, which represent a systematic violation of the Malaysian Code of Ethics.

However, if you are of the view that Nestle is complying with the Malaysian Code of Ethics, we would be very grateful if you could write to us to that effect. For your easy reference, we have attached a draft letter which you could use.

Thank you for your time and attention. If there were any issues, which need clarification, my colleagues and I would be glad to be of assistance.

Yours sincerely
NESTLE PRODUCTS SDN BHD

A. SARAN
Managing Director

Nestlé Products Sdn. Bhd. (45229-H)

NESTLÉ HOUSE, NO.4, LORONG PESIARAN BARAT, P.O. BOX 385, JALAN SULTAN, 46918 PETALING JAYA, SELANGOR, MALAYSIA.
 TEL: 755 4466 / 755 3177 TELEX: NESPRO MA 37165 FAX: 03-755 0992 / 757 7058

Government Response to Nestlé

To date, Nestlé has completed the process and received written evidence from 54 governments indicating satisfaction with Nestlé's implementation of the WHO Code in their Country (see Table 1 for a summary, and pages 52 – 181 for the complete documentation from governments).

At this point in time we are aware of only 1 government which has written to us that we are not in compliance with the WHO Code in their country, and which we have not yet been able to resolve. Another country (Dominican Republic) has indicated need to examine infant formula labels for possible changes. We are in the process of discussions with these governments to clarify the interpretation of the WHO Code. No other national government has, to date, written to Nestlé to indicate that we are not in compliance with the Code in its country. However, if we do receive such a letter, we will proceed to either correct our practices or come into agreement with the government on Code clarification.

As this approach to governments was conducted in all zones where Nestlé has operating companies, the 54 countries represent all areas of the world: Latin America and Caribbean (13), Africa (11), Asia/Oceania (12), Middle East (9), and Europe (9).

In terms of size, the countries are generally representative of those countries with affiliation to the United Nations, although larger states may be slightly over-represented, given the fact that Nestlé operations tend to be present in larger markets. Table 1 is organized by population size of country within each region, from largest to smallest.

In a number of instances, it was the Health Minister who replied, in other cases, the senior official in charge of maternal-child health (General Director, Reproductive Health, Director of Mother, Child, and Adolescent Care), the Co-ordinator for the National Commission for Breastfeeding. In countries with Code monitoring bodies, the Chairman of this body replied. In one case, the Friends of Breastfeeding organization (Egypt) was the responding body, designated by government for monitoring.

Commentary on the Results to Date

This process has helped Nestlé to identify and correct some practices which the governments did not find to be in agreement with the WHO Code, as implemented in their countries.

General Administrator for Health Promotion and Prevention, Ministry of Health, Colombia

"Nestlé Colombia is currently complying with and applying the requirements resulting from the monitoring carried out in 1997 by the Ministry of Health of compliance with the International Code of Marketing of Breast-milk Substitutes and Decree 1397 of 1992, demonstrating its willingness and commitment to undertake the corrective action necessary."

In some countries, the government confirmation was received as part of a process of working with the government to institute National Measures to implement the WHO Code. This was true in Zimbabwe, where the Nestlé manager has worked with the Zimbabwe health ministry in Code implementation and has been appointed by the Minister of Health of Zimbabwe as Vice-Chairman of the Infant Nutrition Committee of the country.

Secretary for Health and Child Welfare, Zimbabwe:

"The Infant Nutrition Committee agreed that Nestlé in Zimbabwe is complying with the WHO International Code of Marketing of Breastmilk Substitutes. Nestlé Zimbabwe is making great efforts to comply with the Zimbabwe Public Health (Breastmilk Substitutes and Infant Nutrition) Regulations 1998..."

Many countries issued a straightforward statement on Code compliance, such as the following:

Minister of Health, Peru:

"We hereby declare that Nestlé Peru S.A. complies in commercial and advertising practices with the basic guidelines of the Government of Peru in application of the International Code of Marketing of Breast-milk Substitutes"

General Director for Reproductive Health, Mexico:

"Special recognition must be given to Nestlé Mexico for their efforts made to date to honor this commitment" (referring to the convention signed by the Manufacturers of Infant Formula, to abide by to the Mexican regulations implementing the International Code).

**Co-ordinator of the Baby Friendly Hospital Program,
Ministry of Health, Jordan:**

"We hereby certify, after control and follow-up, that Nestlé Company... is strictly committed to the local regulations for marketing of breast milk substitutes and baby foods which are consistent with the International Code for marketing of breast milk substitutes."

Secretary (Minister) of Health, Philippines:

"We have been regularly conducting spot checks and investigations in the field and distribution areas throughout the country. In recent years, there were only few violations reported to this Office. Nestlé-Philippines is one of the companies which has consistently co-operated with us in the observance of the Code."

**Chairman, Advisory Panel on the Marketing in Australia of Infant Formula,
Australia**

"I can confirm that the Panel has not found any breaches of the MAIF Agreement against Nestlé Australia since the Agreement's inception in 1992."

General Secretary, The Egyptian Society of Breast-Milk Friends:

"...according to the study we did concerning the level of application of the National Code for Marketing of Breast-Milk Substitutes during 1997-98, it was found that your company is one of the highest applicators of the National Code. We congratulate you on this good result, and we hope that your company will remain as a leader of Infant Formula companies applying the National Code."

Chairperson of Breastfeeding Committee and Baby Friendly Hospital Program, Ministry of Health, Bahrain

"We found Nestlé is the only company when it comes to implementation of WHO Code and Bahrain national Code"

While our request to governments had to do with Code compliance, some chose to comment, as well, on Nestlé's support of breastfeeding:

National Director, Public Health, Angola

"Through the National Directorate of Public Health (DNSP) Nestlé promotes and encourages exclusive breastfeeding as the best option for infants aged up to 4-6 months"

Co-ordinating Physician, Provincial Administration for Health and Social Welfare, New Caledonia:

"Nestlé has always respected the laws governing child nutrition in our country, and has always encouraged the principle that breast-feeding is the best nutrition for infants."

It is noteworthy that validation of Code compliance has been received to date from three of the four Nordic countries (Norway, Denmark, and Finland). The Nordic countries have been particularly strong supporters of the WHO Code, and their confirmation has special significance.

Director, National Health Supervision, Norway

"The Ministry of Health has no information leading to believe that Nestlé does not comply with the agreement." (referring to the national agreement and the International Code)

Part of our intent in conducting this process with governments was to encourage governmental attention to monitoring compliance with the International Code. The statement of the government of South Africa reflect the need for more detailed monitoring in some countries:

Director-General of Health, Department of Health, Government of South Africa.

"With reference to your pertinent question whether the Department is aware of any transgressions by your company, it is agreed that no gross infringements

such as statements that breast-milk substitutes are equal or superior to breast-milk have not been taken notice of. It is, however, impossible to judge without reserve due to the fact that particularly vague transgressions of the Code have not been monitored."

However, the statements of 3 provincial governments in South Africa (Table 1) provide additional evidence concerning Nestlé compliance with the Code, and Nestlé continues the current process with another provincial government (West Cape) to clarify code compliance. In that province, Nestlé will discuss with the authorities on the interpretation of the applicable Code provisions, based on Dr. Brundtland's November, 1998 reaffirmation that WHO's recommendation for age at which exclusive breastfeeding ends is still 4-6 months, not 6 months of age.

Lastly, it is noteworthy that in the 5 countries with formal monitoring bodies (Australia, Singapore, Malaysia, Philippines, and Switzerland) all confirm Nestlé's Code compliance.

Conclusions and Ways to Strengthen the Current Approach

No approach to monitoring is perfect, and this process has both strengths and weaknesses. A major strength is that the process is based on what governments themselves decide is the appropriate or acceptable implementation of the WHO Code in their countries, in keeping with Article 11.1 of the International Code as well as Dr. Brundtland's reaffirmation of the sovereignty of governments in deciding what specific implementation of WHO recommendations are appropriate. This is the government's prerogative and responsibility, not that of companies or non-governmental organizations.

A second strength of the current process is that it fostered communication between the Company and each government on the International Code, and the government exercised the role given to it by Article 11.2 of the International Code, as being responsible for monitoring. Neither companies nor non-governmental bodies have the authority to do so, but are asked to cooperate with each government in its monitoring.

To strengthen the current process, it is hoped that more governments develop formal monitoring bodies, where alleged violations can be brought to the attention of governments and companies concerned for examination and correction. Those governments which have monitoring bodies are in a far better position, as they can have a more direct knowledge of what is going on in the country.

Nestlé hopes that this process will encourage more governments to establish bodies where government, industry, and other interested parties can work out practical implementation of the WHO Code and discuss alleged violations in an ongoing, non-confrontational manner. In this regard, Zimbabwe, Australia, Malaysia, Singapore, and Switzerland all offer constructive examples to follow.

Nestlé S.A.

July 1999

TABLE 1*

1.1 CODE COMPLIANCE IN LATIN AMERICA AND THE CARIBBEAN

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Mexico	Ministry of Health	Director-General Reproductive Health	"Special recognition must be given to Nestle Mexico for their efforts made to date to honour this commitment" (referring to the convention signed by the National Council of Manufacturers of Infant Formula who undertook to comply with the Official Mexican Norms for Care of Mothers during Pregnancy, Childbirth and Infant Care and of New-borns, as well as the WHO International Code of Marketing of Breast-milk Substitutes).
Colombia	Ministry of Health	Director-General Promotion and Prevention	"Nestle Colombia is currently complying with and applying the requirements resulting from the monitoring carried out in 1997 by the Ministry of Health of compliance with the International Code of Marketing of Breast-milk Substitutes and Decree 1397 of 1992, demonstrating its willingness and commitment to undertake the corrective action necessary."
Peru	Ministry of Health	Minister of Health	"Nestle Peru complies in commercial and advertising practices with the basic guidelines of the Government of Peru in application of the International Code of Marketing of Breast-milk Substitutes."
Venezuela	Ministry of Health and Social Welfare	Director of Mother, Child and Adolescent Care	"The undersigned...hereby declares that in its policy of marketing of breast-milk substitutes, Nestle Venezuela does not practice donations of the above mentioned, thus complying with the Code of Ethics of the World Health Organisation, according to information obtained at the end of 1998."
Ecuador	Ministry of Public Health	National Director for Health Control	"Nestle Ecuador complies with the provisions laid down in the Code of Ethics of the World Health Organization and in the Executive Decree 2215, concerning marketing, promotion and advertising practices in regards to breast-milk substitutes."

* Organized by population size of countries within each region, in descending order.

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Bolivia	Ministry of Health and Social Security	Director - National Unit of Maternal and Child Care	"The Ministry of Health and Social Security of Bolivia hereby certifies that Nestle Bolivia carries out its commercial activities within the framework of the convention agreed to by the Government of Bolivia with the World Health Organization concerning marketing of Breast-milk Substitutes."
Paraguay	Ministry of Public Health and Social Welfare	Minister of Public Health and Social Welfare	"The Minister of Public Health and Social Welfare hereby certifies that the Nestle Company of Paraguay has complied with the technical principles and norms currently in force in the nation, regarding the marketing of breast-milk substitutes."
Panama	Ministry of Health	Minister of Health	"The Ministry of Health certifies that in its marketing practices the Nestle Company complies with the directives of the WHO International Code and with the local norms regarding marketing of breast-milk substitutes. Moreover, we emphasise this company's permanent willingness to promote and disseminate the national and international norms in regards to this subject."
Guyana	Ministry of Health	Chief Medical Officer	"Nestle has presented current marketing practices for the breast-milk substitutes they market in Guyana to the Chief Medical Officer at the Ministry of Health...The Chief Medical Officer confirms that the practices presented are in line with Guyana's Code for the Marketing of Breast-Milk Substitutes."
Dominican Republic	National Commission for Breastfeeding	National Co-ordinator for the National Commission for Breast-feeding	"...procedures during the Monitoring carried out in 1997 to verify International Code of Marketing of Breast-milk Substitutes compliance showed that your company had committed several violations of the WHO Code. After an in-depth study of each violation, we have found that in regard to infant formula, these violations were minimal and concerned labelling."
Trinidad and Tobago	Ministry of Health	Principal Medical Officer	"The Ministry of Health congratulates Nestle for keeping the marketing practices for infant formulae and breast-milk substitutes in line with the International Code of Marketing of Breast-milk Substitutes and the Breastfeeding Policy of Trinidad and Tobago."

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Saint Vincent and The Grenadines	Ministry of Health	Minister of Health and the Environment	"Nestle has presented current marketing of Infant Formula products in accordance with the WHO Code as implemented by St. Vincent, to the responsible officials at the Ministry of Health and the Environment...The Ministry of Health confirms that the practices presented are in compliance with the St. Vincent and the Grenadines National Code/Regulations."
Antigua and Barbuda	Ministry of Health and Civil Service Affairs	Minister of Health and Social Improvement	"Nestle has presented current marketing practices for the breast-milk substitutes they market in Antigua & Barbuda to the responsible officials at the Ministry of Health... The Minister of Health confirms that the practices presented are in line with the Antigua & Barbuda National Code/Regulations."

1.2 CODE COMPLIANCE IN AFRICA

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
South Africa: National Government	Department of Health	Director-General: Health	"With reference to your pertinent question whether the Department is aware of any transgressions by your company, it is agreed that no gross infringements such as statements that breastmilk substitutes are equal or superior to breast-milk have not been taken notice of. It is however impossible to judge without reserve due to the fact that particularly vague transgressions of the Code have not been monitored."
Provincial Government: Mpumalanga	Department of Health and Welfare	Department Director: Nutrition	"Nestle have presented current marketing practices for the breast-milk substitutes they market in (South Africa) to the responsible official at the Ministry of Health in Mpumalanga Province. The official confirms that the practices presented are in line with the Code of Ethics of the Marketing of Breast-milk Substitutes."
Free State	Free State Provincial Government - Health	Deputy Director: Nutrition	"The Nutrition Sub Directorate of the Free State Department of Health hereby confirms that, to the best of their knowledge, the representatives from Nestle conduct themselves in accordance with the Code of Ethics for the marketing of breast-milk substitutes at the public health facilities in the Free State Province."
Northern Cape	Dept. of Environmental Affairs, Developmental Social Welfare and Health	Deputy Director: Nutrition	"Nestle have presented current marketing practices for the breast-milk substitutes they market in (South Africa) to the responsible official at the Ministry of Health. The official confirms that the practices presented are in line with the Code of Ethics of the Marketing of Breast-milk Substitutes."
Egypt	Egyptian Society of breast-milk Friends	General Secretary	"...according to the study we did concerning the level of application of the National Code for Marketing of Breast Milk Substitutes during 1997-1998, it was found that your company is one of the highest applicators of the National Code. We congratulate you on this good result, and we hope that your company will remain as a leader of Infant Formulae companies applying the National Code."

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Kenya	Ministry of Health	Minister of Health	"I am glad to inform you that so far Nestle Foods Kenya Limited, has been following the Code as stipulated in the Standards. Your company has also followed the National Policy on Infant Feeding Practices as best they could."
Madagascar	Ministry of Health	Minister of Health	"The Minister of Health confirms that Nestle's policy regarding the marketing of breast-milk substitutes conforms to Decree 96-322, entitled (Regulations for Marketing Breast-milk Substitutes)."
Zimbabwe	The Infant Nutrition Committee	1. Secretary for Health and Child Welfare 2. Chairman for The Infant Nutrition Committee	The Infant Nutrition Committee agreed that Nestle in Zimbabwe is complying with the WHO International Code OF Marketing of Breastmilk Substitutes. Nestle Zimbabwe is making great efforts to comply with the Zimbabwe Public Health (Breastmilk Substitutes and Infant Nutrition) Regulations 1998..."
Angola	Public Health National Direction	National Director	"Through the National Directorate of Public Health (DNSP), Nestle promotes and encourages exclusive breastfeeding as the best option for infants aged up to 4 to 6 months...At the moment, Nestle is working with the DNSP, supporting all efforts towards drawing up a National Code governing the marketing of breast-milk substitutes, in line with the directives issued by the World Health Organization (WHO)."
Rwanda	Ministry of Health	Minister of Health	"I encourage NESTLE to continue implementing the instructions of the WHO Code."
Burundi	Ministry of Public Health	Minister of Public Health	"I find the report very satisfactory and encourage the NESTLE Company to continue implementing the instructions of the WHO Code."
Congo	Ministry of Health	Minister of Health	"The Minister confirms that these practices comply with the International Code of Marketing of Breast-milk Substitutes (WHO)."
Comores	Ministry of Public Health and Population	Minister of Public Health	"The Minister of Health hereby confirms that Nestle's policy concerning marketing of Breast-milk substitutes, complies with the WHO International Code of marketing breast-milk substitutes."

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Djibouti	Ministry of Public Health and Social Welfare	Secretary General	"The Minister of Health confirms by the present communication that, within the territory of the Republic of Djibouti, Nestle's practices in this regard (marketing of breast-milk substitutes) comply with Djibouti regulations."

1.3 CODE COMPLIANCE IN ASIA / OCEANIA

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Philippines	Department of Health	Secretary of Health	"We have been regularly conducting spot checks and investigations in the field and distribution areas throughout the country. In recent years, there were only few violations reported to this Office. Nestle-Philippines is one of the companies which has consistently cooperated with us in the observance of the Code."
Taiwan (China)	Department of Health	(Seal Stamped)	"Up to date, Nestle Taiwan has not had any practices violating the Guidelines on IMF Marketing."
Malaysia	Ministry of Health	Director Family Health Development	"The Ministry of Health would like to thank you for co-operating with the Ministry in upholding the Code of Ethics for Infant Formula Products. It is hoped that your Industry will further improve in your actions towards promoting, protecting and supporting breast feeding and continue to abide by the Code."
Sri Lanka	Ministry of Health and Indigenous Medicine	Addl. Secretary/Health	"Nestle Lanka Ltd. has conformed to the Sri Lanka code for the promotion of Breast Feeding & marketing of the Breast-Milk Substitutes and related products as well as the WHO International Code of marketing of Breast-Milk substitutes in marketing their infant formulae & infant cereals".
Australia	Advisory Panel on the Marketing in Australia of Infant Formula (APMAIF)	Chairman	"I can confirm that the Panel has not found any breaches on the MAIF Agreement against Nestle Australia since the Agreement's inception in 1992."
Hong Kong SAR (China)	Family Health Service Department of Health	Principal Medical Officer	"I am impressed by Nestle's efforts in ensuring its activities to comply with the WHO International Code of Marketing of Breast Milk Substitutes in Hong Kong. To the best of my knowledge, mothers are not being solicited by Nestle's representatives to use infant milk formula with free sampling in all of our maternal and child health centres and maternity homes."

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Singapore	Ministry of Health	Chairman - SIFECs	"I am pleased to confirm that Nestle Singapore does comply and conform with the marketing practices as stated in the SIFECs Code." (refer to Sale of Infant Foods Ethics Committee, Singapore)
New Caledonia	Provincial Administration for Health and Social Welfare	Co-ordinating Physician	"NESTLE has complied fully with the norms of the Code of Marketing of Breast-milk Substitutes. NESTLE has always respected the laws governing child nutrition in our country, and has always encouraged the principle that breast-feeding is the best nutrition for infants."
Kiribati	Ministry of Health	Nutritionist for Secretary MHFP	"Thank you for complying with the Code...As strong advocates of breast-feeding, we will surely inform you of any violation that your company has against the Kiribati Policy and as well as the international code of marketing."
Marshall Islands	Ministry of Health and Environment	Coordinator, Nutrition Unit	"The Code includes important provisions in regards to promotion and advertising of breastmilk substitutes and Nestle does comply with those provisions as far as Majuro Hospital is concerned."
Cook Islands	Ministry of Health	Secretary of Health	"...your company, as far as we are aware does comply with the code in the Cook Islands."
Nauru	Secretary for Health & Medical Services	Acting Director of Public Health	"...the Health Authority on Nauru does not object to your company importing and selling Nestle's Infant Formula products...The Health Authority also understands that the Nestle's Infant Formula products are in accordance with the WHO Code compliance."

1.4 CODE COMPLIANCE IN THE MIDDLE EAST

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Jordan	Ministry of Health	Co-ordinator of Baby Friendly Hospital Program	"We hereby certify, after control and follow-up, that Nestle Co... is strictly committed to the local regulations for marketing of breastmilk substitutes and baby foods which are consistent with the International Code for marketing breastmilk substitutes."
Lebanon	Ministry of Public Health	Minister of Health	"We inform you that until to date we did not receive any complaints regarding your compliance and implementation of the International Code of Marketing of Breast-milk Substitutes."
Palestine	Ministry of Health	Child Health Directorate	"As your compliance with the International Code of Marketing of Breast-milk Substitutes and after our repeated visits to the governmental health institutions which care of infants, I found out that Nestle representatives fully implement the recommendations of the above mentioned code."
Oman	Ministry of Health	Head of Child Health	"We are happy to know that you all have the same goals in improving the health of mothers and children in Oman. We highly appreciate your co-operation and we hope that your Company will continue to give us support and commitment and to abide by the policies as laid down by the Ministry of Health."
United Arab Emirates	Ministry of Health	Director of Ras Al Khaimah Medical District	"Ras Al Khaimah Medical District certifies that Nestle complies with the principles and aim of the International Code of Marketing of Breast-milk Substitutes issued by the World Health Organization."
Kuwait	Ministry of Health	Head-Community Nutrition Unit	"The Nutrition Unit at the Ministry of Health in the State of Kuwait certifies that the Marketing practices of Nestle Kuwait comply with the principles and aim of the International Code of Marketing of Breast-milk Substitutes issued by the WHO."
Cyprus	Ministry of Health	Medical and Public Health Services Director	"We hereby certify that in Cyprus we have not verified any violation of the aims and principles of the said "code" by Nestle agent distributors."

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Qatar	Ministry of Public Health	Director of Medical Staff	"The administration of Primary Health Care in Qatar certifies that Nestle complies with the principles and aim of the International Code of marketing of Breast-milk Substitutes issued by the World Health Organization."
Bahrain	Ministry of Health	Chairperson of Breast Feeding Committee & Baby Friendly Hospital Program	"We found Nestle is the only company when it comes to implementation of WHO Code and Bahrain national Code."

1.5 CODE COMPLIANCE IN EUROPE

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Russia	Ministry of Agriculture and Food Stuffs of the Russian Federation	Deputy Head of Department of food manufacturing industry and infant food	"We would like to inform you that no case of Nestle Food LLC's non complying with the EEC Directive for the marketing of breast-milk substitutes has been so far reported to the Ministry..."
Germany	Federal Government	Federal Council	The German Government published a report in 1997 stating that no serious infringements of the law on Advertising for Infant Formula and Follow-on Formula could be recognised. It also stated that there was no reason to initiate proceedings against infant foods manufacturers. Up to now, Nestle Germany has not received objections concerning Code Compliance by government officials.
Romania	Ministry of Health	Director of Department for Woman and Child Assistance	"Having assessed the marketing activity in Romania of your branch we assert that the modalities presented are in accordance with the principle and objectives of the International Marketing Code in the field of replacements for maternal milk."
Portugal	Ministry of Health	Chief of Environmental Health Division	"... we confirm that, to the best of our knowledge, the practices followed by the Company regarding the marketing of its infant milk/formula are in line with the abovementioned Decree." (refer to Decree No. 115/93)
Bulgaria	Ministry of Health	Deputy Minister and Chief State Sanitary Inspector	"...we inform you that as of current moment, the Ministry of Health is not aware of violations on the side of Nestle Sofia A.D., on the application of the requirements of the Commission directive 91/321/EEC on infant formulae and follow up formula, connected with the marketing activities on the infant formula."
Switzerland	Codex Panel		The minutes of the Codex Panel meetings certify -on a regular basis- that the companies which have signed the Swiss Code of Conduct -included Nestle Switzerland comply to the letter and the spirit of the code and that all complaints which have come up during the existence of the panel could be settled by mutual agreement.

COUNTRY	ISSUED BY:	SIGNED BY:	REMARKS
Denmark	Ministry of Food, Agriculture and Fisheries	Danish Veterinary and Food Administration	"In answer to Nestle's letter of 26 April 99, the Veterinary and Food Administration can advise that the Administration has implemented the EC Directive No. 91/321 of 14 May 1991 as amended by the Commission's Directive No. 96/4 EC... concerning breast-milk substitutes and complementary foods for infants and young children. Thereby, the principles and aim of the International Marketing Code related to the marketing of breast-milk substitutes, which was adopted by the World Health Organization at the 34th General Assembly, have been integrated into Danish law. The ongoing food control system is currently supervising that the law is being respected."
Finland	Elintarvikevirasto Livsmedelsverket	Director	"National Food Administration, as the authority responsible for the control according the Food Law 361/1995 hereby confirms that to our best knowledge the marketing practices concerning Infant Formula of Suomen Nestle Oy are in accordance with the Decision 807/1994."
Norway	National Health Supervision	Director	"The Health Supervision has no information leading to believe that Nestle does not comply with the agreement." (referring to the WHO Code).

Nestlé Instructions

**for
Implementation of the**

**WHO INTERNATIONAL CODE
OF MARKETING
OF BREAST-MILK SUBSTITUTES**

**Updated
July 1996**

CROSS REFERENCE INDEX

Advertising	Art. 5.1
Aim	Art. 1
Consumer Promotion	Art. 5.1; 5.3; 5.4
Definitions	Art. 3
Donation of Capital Equipment	Art. 6.8
Educational and Informational Materials:	
- General Health/Nutrition	Art. 4.2; 4.3
- Infant Formula Preparation Instructions	Art. 4.2
- Health Education for Mothers	Art. 5.5; 6.2; 6.5; 8.2
- Scientific and Technical	Art. 7.2
Items of Professional Utility	Art. 6.8
Labels	Art. 9.1; 9.2; 9.3; 9.4
Monitoring	Art 11.2; 11.3; 11.4; 11.5
Personnel	Art. 5.5; 6.2; 6.5; 7.2; 8.2
Samples	Art. 3; 5.2; 7.4
Scope	Art. 2, Appendix 3
Sponsorship of Scientific Activities	Art. 7.5
Supplies	Art. 3; 6.6; 6.7
Trade Promotion	Art. 5.3
Annexes 1 to 6	p. 34

Instructions to all Companies of the Nestlé Group and to all agents and distributors who market Infant Formula (1) in Developing Countries (2) under Trade Marks owned by the Nestlé Group

Purpose

Nestlé has publicly stated its support for the International Code of Marketing of Breast-milk Substitutes (WHO 1981), which aims to protect, promote and support breast-feeding while recognizing that there is a legitimate market for infant formula when breast-feeding is not possible.

The Nestlé Instructions - first issued in February 1982 and subsequently revised in October 1982 after consultation with many parties, including WHO and UNICEF - give precise implementation guidelines on Company policy with regard to the WHO Code to market management and personnel at all levels concerned with the marketing of infant formula. This July 1996 revision updates Nestlé policy in light of fourteen years of experience with the WHO Code in developing countries and also takes into account subsequent related World Health Assembly resolutions where appropriate.

The Nestlé Instructions apply to the developing countries (2) where no national code or other official measure implementing the International Code of Marketing of Breast-milk Substitutes is in force. They supercede all previous Nestlé instructions. Where countries have local codes or other national measures giving effect to the WHO Code, operating companies and agents must follow the national code/measures as well as the Nestlé Instructions where these provide necessary clarity, are not in conflict with national measures, and/or include areas not covered by the national measures. In case of doubt, Nestec B-M&N/IN, Vevey should be consulted.

Implementation Instructions

- All Nestlé personnel involved in the marketing and sale of infant formula products must be familiar with and adhere strictly to these instructions, as must all agents and distributors of Nestlé products.
- All communication materials for infant formula must be consistent with these instructions.
- Retailers should be reminded that it is company policy to prevent promotion of infant formula (1) at the point of sale (see annex 6.)
- Any queries with regard to implementation of these instructions should be addressed to Nestec B-M&N/IN, Vevey.

(1) Includes follow-up formula when these have the same brand as the starter formula (e.g. Nan 1 and Nan 2)

(2) All countries of Africa, Middle East, Asia, Latin America, the Caribbean Nations, and the Pacific Nations except Japan, Republic of Korea, Singapore, Taiwan and HongKong (until 01.07.1997). In developed countries Nestlé respects National Codes, regulations, and/or other applicable legislation relating to the marketing of infant formula.

This document may be made public to avoid misrepresentation of Nestlé policy by third parties and to facilitate monitoring and investigation of alleged complaints. Allegations may be reported directly to any Nestlé company or to the Secretariat of the International Association of Infant Food Manufacturers, IFM (see complaint form, Annex 3).

Nestlé's Commitment to the WHO Code

Since 1981, Nestlé has illustrated its commitment to the WHO Code by:

- issuing detailed internal Instructions for the immediate implementation of WHO recommendations in all developing countries;
- appointing an independent Commission, the Nestlé Infant Formula Audit Commission, to monitor marketing practices and ensure that Nestlé conduct at every level conforms to the Code (1982-1991);
- encouraging governments in all major infant formula markets throughout the world to enact a Code of Marketing of Breast-Milk Substitutes or any other measure, as appropriate to the social and legislative framework of the country, and to encourage national authorities to develop impartial, transparent monitoring to ensure such codes/measures are enforced and complied with by all relevant parties;
- supporting the appointment of an industry-wide Ombudsman (1991) for the International Association of Infant Food Manufacturers, IFM;
- actively seeking an international solution to outstanding controversy surrounding infant and young child nutrition issues.

Using this Manual

The WHO Code provisions are shown on the left-hand side of the page, and the Instructions to Nestlé personnel on how to implement each of these provisions of the WHO Code, are shown on the right-hand side. These Instructions do not replace the WHO Code provisions, but are intended to assist Nestlé personnel in giving practical effect to the Code.

NB : throughout these instructions, the use of the term "mothers" includes pregnant women, mothers or members of their families.

Article 1. Aim of the Code

The aim of this Code is to contribute to the provision of safe and adequate nutrition for infants, by the protection and promotion of breast feeding, and by ensuring the proper use of breast-milk substitutes, when these are necessary, on the basis of adequate information and through appropriate marketing and distribution.

This must be the aim of all our infant food marketing practices

Article 2. Scope of the Code

The Code applies to the marketing and practices related thereto, of the following products : breast-milk substitutes, including infant formula; other milk products, food and beverages, including bottle-fed complementary foods, when marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breast-milk ; feeding bottles and teats. It also applies to their quality and availability, and to information concerning their use.

These Instructions apply to the marketing of infant formula covered by Codex (FAO/WHO Foods Standards Programme, Recommended International Standard, Codex Alimentarius Commission, 72-1981), i.e. infant formulae which are suitable for use as the sole source of nutrition for a baby during the first 4 to 6 months of life (see Article 10.2).

4.B. The scope is clarified in Annex 3 (p. 33) of the Code :

During the first four to six months of life, breast milk alone is usually adequate to sustain the normal infant's nutritional requirements. Breast milk may be replaced (substituted for) during this period by *bona fide* breast-milk substitutes, including infant formula. Any other food, such as cow's milk, fruit juices, cereals, vegetables, or any other fluid, solid or semi-solid food intended for infants and given after this initial period, can no longer be considered as a replacement for breast milk (or as its *bona fide* substitute)".

NOTE: The following Nestlé products are not covered by the Code : *Follow-up formulae**, *Sweetened Condensed Milk*, *Evaporated Milk*, *Skimmed Milk*, *UHT Milk*, *Full Cream Powdered Milk*, *Cereal Foods*, *Growing Up Milks*, and *Sterilized Meat, Vegetable and Fruit preparations for babies*.

*except follow-up formulae which have the same brand name as starter formula, (e.g. Nan 1 and Nan 2), and which are subject to the same marketing restrictions as starter formula.

Article 3. Definitions (see Annex 1)

WHO CODE RECOMMENDATIONS

NESTLE INSTRUCTIONS TO PERSONNEL TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

Article 4. Information and Education

4.1 Governments should have the responsibility to ensure that objective and consistent information is provided on infant and young child nutrition. This responsibility should cover either the planning, provision, design and dissemination of information, or their control.

4.1 This provision is addressed to governments (see also Art. 4.2)

4.2 Informational and educational materials, whether written, audio or visual, dealing with the feeding of infants and intended to reach pregnant women and mothers of infants and young children, should include clear information on all the following points : (a) the benefits and superiority of breast-feeding ; (b) maternal nutrition, and the preparation for and maintenance of breast-feeding; (c) the negative effect on breast-feeding of introducing partial bottle-feeding; (d) the difficulty of reversing the decision not to breast-feed; and (e) where needed, the proper use of infant formula, whether manufactured industrially or home-prepared. When such materials contain information about the use of infant formula, they should include the social and financial implications of its use; the health hazards of inappropriate foods or feeding methods; and, in particular, the health hazards of unnecessary or improper use of infant formula and other breast-milk substitutes. Such materials should not use any pictures or text which may idealize the use of breast-milk substitutes.

4.2 All infant feeding information intended for mothers whether of a general educational nature or dealing with the explanation and instructions for the use of infant formula must contain a statement regarding each point contained in this article of the WHO Code. Specific points from Art. 4.2 will be dealt with in much greater detail in certain educational materials such as mother books and educational posters.

Only information intended for mothers that deals with the explanation and instructions for use of specific infant formula such as preparation instructions and prescription leaflets should bear corporate and product brands. In order to avoid confusion with other infant formula products or milk products inappropriate for use as breast milk substitutes, they may include a packshot. Such materials must include the information specified in this article of the WHO Code.

These materials are intended for use by health workers in instructing mothers who have to use breast-milk substitutes and may not be given to mothers by company personnel. They are intended to complement information contained on the label, especially when catering to the needs of minority language groups or the needs of semi-literate or illiterate mothers.

Baby pictures may be used only to enhance the educational value of information and must not idealize formula feeding. In case of doubt, Nestec B-M&N must be consulted (see also note under Art. 5.1)

4.3 Donations of informational or educational equipment or materials by manufacturers or distributors should be made only at the request and with the written approval of the appropriate government authority or within guidelines given by governments for this purpose. Such equipment or materials may bear the donating company's name or logo, but should not refer to a proprietary product that is within the scope of this Code, and should be distributed only through the health care system.

4.3 Materials intended for pregnant women and mothers that are of a general nature related to maternal and child health such as educational posters, educational charts, mother books, breast-feeding booklets, weight/growth charts, vaccination and health cards, height measurement charts, films or slide presentations, videocassettes, CD-ROM's, etc. **must not contain illustrations of infant formula or mention the names of individual infant formula brands. Corporate name or logo may be used.** If these materials have been edited by the company in collaboration with the health authorities or the medical profession, this may be mentioned. Such materials should be made available to health care institutions and professionals only upon their request and in accordance with any applicable government requirements or guidelines.

Note: Materials covered under Articles 4.2 and 4.3 may only be given or shown to mothers by health professionals, and when dealing with infant feeding must include the information required by Art. 4.2 of the WHO Code. Mother books may include generic information on infant formula of an educational nature which explains when the use of an infant formula may be necessary, and the precautions for correct use.

WHO CODE RECOMMENDATIONS

NESTLE INSTRUCTIONS TO PERSONNEL TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

Article 5. The General Public and Mothers

5.1 There should be no advertising or other form of promotion to the general public of products within the scope of this Code.

5.1 Information relating to infant formula must not be communicated directly to mothers or the general public either through public media or by personal contact between company representatives and the public. This includes a ban on :

- participation in/sponsorship of baby shows (even when invited to participate by health workers or charitable institutions.)
- distribution of gift packs for mothers (for example, containing infant formula or feeding bottles or other baby accessories)
- distribution to mothers of materials of a non-educational nature (whether product-related or not) : birth certificates, calendars, baby albums, etc.

General information on infant feeding and baby care, which includes information on the proper use of infant formula (such as Mother Books and Posters) may only be distributed to mothers by health workers or displayed by them in health care facilities subject to the provisions of Art. 4.2, 4.3, 6.2 and 7.2. Such information may not feature infant formula brands and may not be used as advertising or promotion aimed at the general public.

Note: Educational materials intended for use in instructing mothers must be consistent with these instructions.

5.2 Manufacturers and distributors should not provide, directly or indirectly, to pregnant women, mothers or members of their families, samples of products within the scope of this Code

5.3 In conformity with paragraphs 1 and 2 of this Article, there should be no point-of-sale advertising, giving of samples, or any other promotion device to induce sales directly to the consumer at the retail level, such as special displays, discount coupons, premiums, special sales, loss-leaders and tie-in sales, for products within the scope of this Code. This provision should not restrict the establishment of pricing policies and practices intended to provide products at lower prices on a long-term basis.

5.2 Samples of infant formula may only be given to health workers, never to mothers (see Art. 7.4).

5.3 Sales promotion activities at the retail level on behalf of infant formula* are not permitted, i.e.:

- no coupon redemption schemes
- no raffles or lotteries
- no point of sale promotions (i.e. deals, gifts, special displays, including display contests)
- no in-store demonstrations
- no company-induced price offers at the retail level (consumer discounts, loss leaders, tie-in sales)

This does not prevent the implementation of a normal trade price structure.

This policy shall be communicated to wholesalers and retailers of Nestlé infant formula products who must be reminded that it is company policy to prevent promotion of infant formula at the point of sale (see Attachment 6). It is the sales staff's responsibility to maintain stock rotation and to ensure clean and tidy presentation of infant formula at the point of sale where it is needed. Shelf or bin markers clearly indicating product name and price are permitted, but promotional advertising is not.

** Follow-up formulae which have the same brand name as starter formula (e.g. Nan 1 and Nan 2) are subject to the same marketing restrictions as starter formula.*

WHO CODE RECOMMENDATIONS

NESTLE INSTRUCTIONS TO PERSONNEL TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

5.4 Manufacturers and distributors should not distribute to pregnant women or mothers of infants and young children any gifts of articles or utensils which may promote the use of breast-milk substitutes or bottle-feeding.

5.5 Marketing personnel, in their business capacity, should not seek direct or indirect contact of any kind with pregnant women or with mothers of infants and young children.

5.4 See instructions above (Art. 5.1).

5.5 Company personnel whose responsibilities include the provision of information to the health professions about infant formula may not solicit contact with pregnant women or mothers either individually or in groups - even for the purpose of providing information or samples of products not covered by the Code, such as food supplements for expectant and nursing mothers.

This does not prevent appropriately qualified personnel from responding to complaints or unsolicited requests for information on correct use of infant formula. Requests for information on health matters, or general information on infant formula, must be referred to a health worker.

Article 6. Health Care Systems

6.1 The health authorities in Member States should take appropriate measures to encourage and protect breast-feeding and promote the principles of this Code, and should give appropriate information and advice to health workers in regard to their responsibilities, including the information specified in Article 4.2.

6.2 No facility of a health care system should be used for the purpose of promoting infant formula or other products within the scope of this Code. This Code does not, however preclude the dissemination of information to health professionals as provided in Article 7.2.

6.3 Facilities of health care systems should not be used for the display of products within the scope of this Code, for placards or posters concerning such products, or for the distribution of material provided by a manufacturer or distributor other than that specified in Article 4.3.

6.4 The use by the health care system of "professional service representatives", "mothercraft nurses", or similar personnel, provided or paid for by manufacturers or distributors, should not be permitted.

6.1 Addressed to the health authorities.

6.2 Nestlé instructions relating to Articles 5.1, 5.2, 5.4, & 5.5 also apply to Nestlé activities within the health care system.

The distribution to health care facilities of educational materials bearing corporate identification, subject to the requirements of Article 4, is permitted. Scientific or Technical Product Information, and Instructions intended to assist health workers in guiding mothers on the correct use of specific infant formula may only be distributed to health workers (see Art. 7.2).

6.3 See above.

6.4 Company personnel must not be used by the health care system for advising mothers or similar duties. The role of company personnel is covered in Art. 8.2.

WHO CODE RECOMMENDATIONS

6.5 Feeding with infant formula, whether manufactured or home-prepared, should be demonstrated only by health workers, or other community workers if necessary; and only to the mothers or family members who need to use it; and the information given should include a clear explanation of the hazards of improper use.

6.6 Donations or low-price sales to institutions or organizations of supplies of infant formula or other products within the scope of this Code, whether for use in the institutions or for distribution outside them, may be made. Such supplies should only be used or distributed for infants who have to be fed on breast-milk substitutes. If these supplies are distributed for use outside the institutions, this should be done only by the institutions or organizations concerned. Such donations or low-price sales should not be used by manufacturers or distributors as a sales inducement.

NESTLE INSTRUCTIONS TO PERSONNEL
TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

6.5 Company personnel may not assist in this work but may provide relevant educational/instruction material to assist health workers in guiding mothers. In case mothers request advice from company personnel, they should be referred to the medical profession or other health workers. (See Art. 5.5 - see also Instructions pertaining to Art. 6.2 above).

6.6 Free or low-price (1) infant formula supplies may not be donated to maternity wards and hospitals for use by healthy newborn babies except where national rulings allow the company to respond to a health worker's written request for infant formula donations for social welfare cases (e.g. multiple births, where a mother has died, etc.). In such cases, the label or lid must be clearly marked with a sticker stating:

"Free supply (or reduced-price supply) for use at the discretion of the health services or medical profession; for infants who have to be fed on breast-milk substitutes."

Note: Supplies of infant formula and follow-up formula may be donated upon written request for feeding hospitalized infants, provided this complies with national regulations and is not used as a sales incentive (see Art. 6.7).

(1) low-price means a price below the best wholesale price. However, Nestlé subsidiaries and distributors may submit lower price bids for public infant formula tenders in accordance with national requirements

6.7 Where donated supplies of infant formula or other products within the scope of this Code are distributed outside an institution, the institution or organization should take steps to ensure that supplies can be continued as long as the infants concerned need them. Donors, as well as institutions or organizations concerned, should bear in mind this responsibility.

6.7 In cases where free or low-price supplies of infant formula are used outside an institution, the following instructions must be respected :

1. The institution or health worker requesting the supply must inform the company of the total quantity required for feeding the infant.

2. The company will reserve the right to determine on a case-by-case basis whether that quantity can be supplied, and will inform the health worker concerned of its decision, and the implications for meeting continued requirements.

3. Obligations entered into under this heading must be confirmed in writing, and records of quantities distributed must be maintained for 12 months.

4. The Company will supply relevant instructions to the health worker to ensure that the product is used correctly.

5. Nestlé will make it clear that use outside an institution of supplies that have been made available on a free- or reduced-price basis, is at the discretion and under the responsibility of that institution. Donors as well as institutions or organisations concerned should bear in mind this responsibility.

WHO CODE RECOMMENDATIONS

6.8 Equipment and materials in addition to those referred to in Article 4.3, donated to a health care system may bear a company's name or logo, but should not refer to any proprietary product within the scope of this Code.

NESTLE INSTRUCTIONS TO PERSONNEL
TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

6.8 This refers to materials and equipment intended for use by health workers and institutions. Equipment such as incubators and audio visual equipment (hardware and software) and low-cost service items, such as diaries and gestation calendars, for the use of health workers may bear the company name and logo. Equipment exceeding a value of US\$ 50 may only be provided against a written request from the head of the department concerned or in accordance with national regulations.

Service items given to the medical profession but used publicly in the health institutions including :

- wrist bands
- hospital health cards
- arm/head measuring tapes
- tongue spatulas
- bibs
- feeding bottles
- plates/cups
- alcohol swabs, etc.

may not bear any infant formula brand but may bear the Corporate logo. Only market management may approve the donation of equipment and materials and all items mentioned in Art. 6.8.

Article 7. Health workers

7.1 Health workers should encourage and protect breast-feeding; and those who are concerned in particular with maternal and infant nutrition should make themselves familiar with their responsibilities under this Code, including the information specified in Article 4.2.

7.2 Information provided by manufacturers and distributors to health professionals regarding products within the scope of this Code should be restricted to scientific and factual matters, and such information should not imply or create a belief that bottle-feeding is equivalent or superior to breast-feeding. It should also include the information specified in Article 4.2.

7.3 No financial or material inducements to promote products within the scope of this Code should be offered by manufacturers or distributors to health workers or members of their families, nor should these be accepted by health workers or members of their families.

7.1 Health workers' responsibility. Nestlé will cooperate in these efforts by providing upon request, and whenever possible culturally appropriate educational materials (videos, brochures, posters) promoting breast-feeding.

7.2 In their contacts with health workers, Company Personnel have the responsibility to emphasize the superiority of breast-feeding and to give objective information on scientific and factual matters pertaining to infant formula and its correct use.

Information on infant formula intended for health professionals may bear corporate and product brands (packshot permitted) and must include the information specified in Art. 4.2 of the Code. Detailed and illustrated preparation instructions, using vernacular languages, may be given to health workers to assist them in instructing mothers who have to use breast-milk substitutes.

7.3 Financial or material inducements to promote infant formula may not be offered to health workers or members of the families. Low-cost items of professional utility (see Annex 4), or culturally appropriate gifts may be given to health workers on an occasional basis provided they are not used as a sales inducement. Such items may bear the Corporate logo.

WHO CODE RECOMMENDATIONS

7.4 Samples of infant formula or other products within the scope of this Code, or of equipment or utensils for their preparation or use, should not be provided to health workers except when necessary for the purpose of professional evaluation or research at the institutional level. Health workers should not give samples of infant formula to pregnant women, mothers of infants and young children, or members of their families.

7.5 Manufacturers and distributors of products within the scope of this Code should disclose to the institution to which a recipient health worker is affiliated any contribution made to him or on his behalf for fellowships, study tours, research grants, attendance at professional conferences or the like. Similar disclosures should be made by the recipient.

NESTLE INSTRUCTIONS TO PERSONNEL
TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

7.4 Samples of infant formula may be provided to individual health workers for the purpose of professional evaluation only in the following instances:

- to introduce a new infant formula product;
- to introduce a new formulation of an existing product;
- to introduce our infant formula range to a newly qualified health professional.

In these cases, one or two cans of formula may be given to health professionals for this purpose and one time only. Samples must bear the mention "sample for professional evaluation" and sample distribution records must be maintained for 12 months. Infant formula may also be provided for clinical validation or research at the institutional level, subject to completion of a research protocol (see Annex 5, Nestlé's clinical validation protocol). In such cases, the infant formula must bear a sticker: "Formula provided for Clinical Validation - NOT FOR RESALE"

Important Note: Clinical validation trials are not to be used as a sales inducement and are subject to the detailed rules specified in Annex 5.

7.5 The decision to support scientific activities such as congresses, scholarships, study tours, etc. must be taken on a case-by-case basis by Market Management. In case of doubt, Nestec B-M&N/IN must be consulted. Financial or other support does not imply endorsement of Nestlé policies or activities by the recipients. Preference will be given to support for nominees of associations or institutions. Requests for support must be confirmed in writing by a responsible officer of the association/ institution concerned. Guidelines for such support established by the association/ institution or by the authorities must be strictly complied with.

Article 8. Persons employed by Manufacturers and Distributors

8.1 In systems of sales incentives for marketing personnel, the volume of sales of products within the scope of this Code should not be included in the calculation of bonuses, nor should quotas be set specifically for sales of these products. This should not be understood to prevent the payment of bonuses based on the overall sales by a company of other products marketed by it.

8.2 Personnel employed in marketing products within the scope of this Code, should not, as a part of their job responsibilities, perform educational functions in relation to pregnant women or mothers of infants and young children. This should not be understood as preventing such personnel from being used for other functions by the health care system at the request and with the written approval of the appropriate authority of the government concerned.

8.1 Bonuses or incentives based on infant formula sales are not to be paid to sales staff, medical delegates, and other marketing personnel. Remuneration for sales staff and medical delegates must be examined on a country-by-country basis in order to determine the criteria to be established for appropriate compensation, such as clean display, customer service, Code knowledge, etc.

8.2 Company personnel whose responsibilities include the provision of information about infant formula to the health professions may not perform educational functions in relation to pregnant women or mothers (see also Art. 5.5 and 6.4).

If the health authorities require Nestlé assistance for other scientific or educational purposes, they must request such assistance in writing and identify the functions.

WHO CODE RECOMMENDATIONSNESTLE INSTRUCTIONS TO PERSONNEL
TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS**Article 9. Labelling**

9.1 Labels should be designed to provide the necessary information about the appropriate use of the product, and so as not to discourage breast-feeding.

9.2 Manufacturers and distributors of infant formula should ensure that each container has a clear, conspicuous, and easily readable and understandable message printed on it, or a label which cannot readily become separated from it, in an appropriate language, which includes all the following points: (a) the words "Important Notice" or their equivalent; (b) a statement of the superiority of breast-feeding; (c) a statement that the product should be used only on the advice of a health worker as to the need for its use and the proper method of use; (d) instructions for appropriate preparation, and a warning against the health hazards of inappropriate preparation. Neither the container nor the label should have pictures of infants, nor should they have other pictures or text which may idealize the use of infant formula. They may, however, have graphics for easy identification of the product as a breast-milk substitute and for illustrating methods of preparation. The terms "humanized", "maternalized" or similar terms should not be used. Inserts giving additional information about the product and its proper use, subject to the above conditions, may be included in the package or retail unit. When labels give instructions for modifying a product into infant formula, the above should apply.

9.1 Individual country requirements, if any, must be respected in addition to the WHO Code requirements which are recognized as the minimum requirement.

9.2 Nestlé infant formula labels have been developed in consultation with WHO and comply with the WHO Code (1)

It is important to note that the "appropriate language" will be subject to the decision of the health authorities. In cases where several languages are commonly read and understood by different population groups, it may be necessary to include additional information in the form of on-pack leaflets. In case of doubt, the national authorities should be consulted.

(1) S. Wittet and M. Zimmerman, "Implementing the World Health Organization Code: Improved Information for Mothers", Journal of Nutrition Education, Vol. 19, No 2, 1987.

9.3 Food products within the scope of this Code, marketed for infant feeding, which do not meet all the requirements of an infant formula, but which can be modified to do so, should carry on the label a warning that the unmodified product should not be the sole source of nourishment of an infant. Since sweetened condensed milk is not suitable for infant feeding, nor for use as a main ingredient of infant formula, its label should not contain purported instructions on how to modify it for that purpose.

9.4 The label of food products within the scope of this Code should also state all the following points : (a) the ingredients used ; (b) the composition/ analysis of the product; (c) the storage conditions required; and (d) the batch number and the date before which the product is to be consumed, taking into account the climatic and storage conditions of the country concerned.

9.3 In the absence of specific national requirements, Nestlé Sweetened Condensed Milk labels bear the following warning

"Sweetened Condensed Milk is not to be used as a breast-milk substitute"

Similarly, Nestlé Powdered Milk labels must include the following information :

"However, (brand name), like liquid cow's milk, has not been modified for infant feeding".

9.4 To be implemented in accordance with individual country requirements, recognizing that the WHO Code is the minimum requirement.

WHO CODE RECOMMENDATIONS

NESTLE INSTRUCTIONS TO PERSONNEL TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

Article 10. Quality

10.1 The quality of products is an essential element for the protection of the health of infants and therefore should be of a high recognized standard.

10.2 Food products within the scope of this Code should, when sold or otherwise distributed, meet applicable standards recommended by the Codex Alimentarius Commission and also the Codex Code of Hygienic Practice for Foods for Infants and Children.

10.1 The manufacture and distribution of all Nestlé products is based on this principle.

10.2 In accordance with current standards except where otherwise specified by government regulation.

Article 11. Implementation and Monitoring

11.1 Governments should take action to give effect to the principles and aim of this Code, as appropriate to their social and legislative framework, including the adoption of national legislation, regulations or other suitable measures. For this purpose, governments should seek, when necessary, the cooperation of WHO, UNICEF and other agencies of the United Nations System. National policies and measures, including laws and regulations, which are adopted to give effect to the principles and aim of this Code should be publicly stated, and should apply on the same basis to all those involved in the manufacture and marketing of products within the scope of this Code.

11.2 Monitoring the application of this Code lies with governments acting individually, and collectively through the World Health Organization as provided in paragraphs 6 and 7 of this Article. The manufacturers and distributors of products within the scope of this Code, and appropriate non governmental organizations, professional groups, and consumer organizations should collaborate with governments to this end.

11.3 Independently of any other measures taken for implementation of this Code, manufacturers and distributors of products within the scope of this Code should regard themselves as responsible for monitoring their marketing practices according to the principles and aim of this Code, so that appropriate action can be taken. The appropriate governmental authority should also be informed.

11.1 This makes it clear that implementation and interpretation of the Code in each country is the responsibility of the government (usually the Health Authorities). Nestlé Market Managers should make every effort, in cooperation with our competitors, to encourage the development of clear and unambiguous national codes where these do not yet exist

11.2 See above. It is vital that impartial and effective monitoring procedures, under government responsibility, be included as part of the measures to implement the Code. Contact Nestec B-M&N/IN, Vevey, if in doubt how to proceed.

11.3 Internal monitoring of the correct implementation of these instructions and/or of the national code if it exists, is an on-going responsibility of Nestlé Market Management.

WHO CODE RECOMMENDATIONS

11.4 Non governmental organizations, professional groups, institutions and individuals concerned should have the responsibility of drawing the attention of manufacturers or distributors to activities which are incompatible with the principles and aim of this Code, so that appropriate action can be taken. The appropriate governmental authority should also be informed.

11.5 Manufacturers and primary distributors of products within the scope of this Code should apprise each member of their marketing personnel of the Code and of their responsibilities under it.

11.6 In accordance with Article 62 of the Constitution of the World Health Organization, Member States shall communicate annually to the Director-General information on action taken to give effect to the principles and aim of this Code.

11.7 The Director-General shall report in even years to the World Health Assembly on the status of implementation of the Code; and shall, on request, provide technical support to Member States preparing national legislation on regulations, or taking other appropriate measures implementing and furtherance of the principles and aim of this Code.

NESTLE INSTRUCTIONS TO PERSONNEL
TO ASSIST IN IMPLEMENTING THE WHO CODE PROVISIONS

11.4 Complaints relating to alleged non-conformity by Nestlé with the WHO Code must be properly documented to allow prompt investigation. For this purpose, a complaint form has been established (Annex 3). Prompt investigation will be facilitated by careful documentation of the alleged non-conformity.

11.5 As stated in the Introduction, these instructions must be communicated to all company personnel employed by companies of the Nestlé Group or by agents and primary distributors engaged in the marketing of Infant Formula.

11.6 Addressed to governments.

11.7 Addressed to the Director General, WHO

ANNEXES

Annex 1	International Code (Art. 3) Definitions	p. 35-36
Annex 2	Supplies Request Form	p. 37-38
Annex 3	Complaint Form	p. 39-40
Annex 4	Approved List of Materials of Professional Utility	p. 41-42
Annex 5	Clinical Validation Policy	p. 43-49
Annex 6	Reminder to Retailers	p. 50-51

INTERNATIONAL CODE OF MARKETING OF BREAST-MILK SUBSTITUTES

Article 3. Definitions

For the purposes of this Code :

"Breast-milk substitute"	means	any food being marketed or otherwise represented as a partial or total replacement for breast-milk, whether or not suitable for that purpose.
"Complementary food"	means	any food, whether manufactured or locally prepared, suitable as a complement to breast-milk or to infant formula, when either becomes insufficient to satisfy the nutritional requirements of the infant. Such food is also commonly called "weaning food" or "breast-milk supplement".
"Container"	means	any form of packaging of products for sale as a normal retail unit, including wrappers.
"Distributor"	means	a person, corporation or any other entity in the public or private sector engaged in the business (whether directly or indirectly) of marketing at the wholesale or retail level a product within the scope of this Code. A <u>"primary distributor"</u> is a manufacturer's sales agent, representative, national distributor or broker.
"Health care system"	means	governmental, nongovernmental or private institutions or organizations engaged, directly or indirectly, in health care for mothers, infants and pregnant women; and nurseries or child-care institutions. It also includes health workers in private practice. For the purposes of this Code, the health care system does not include pharmacies or other established <u>sales outlets</u> .

"Health worker"	means	a person working in a component of such a health care system, whether professional or non-professional, including voluntary, unpaid workers.
"Infant formula"	means	a breast-milk substitute formulated industrially in accordance with applicable Codex Alimentarius standards, to satisfy the normal nutritional requirements of infants up to between four and six months of age, and adapted to their physiological characteristics. Infant formula may also be prepared at home, in which case it is described as "home-prepared".
"Label"	means	any tag, brand, mark, pictorial or other descriptive matter, written, printed, stencilled, marked, embossed or impressed on, or attached to, a container (see above) of any products within the scope of this Code.
"Manufacturer"	means	a corporation or other entity in the public or private sector engaged in the business or function (whether directly or through an agent or through an entity controlled by or under contract with it) of manufacturing a product within the scope of this Code.
"Marketing"	means	product promotion, distribution, selling, advertising, product public relations, and information services.
"Marketing personnel"	means	any persons whose functions involve the marketing of a product or products coming within the scope of this Code.
"Samples"	means	single or small quantities of a product provided without cost.
"Supplies"	means	quantities of a product provided for use over an extended period, free or at a low price, for social purposes, including those provided to families in need.

**INFANT FORMULA
REQUEST FOR FREE OR LOW-COST SUPPLIES**

Please supply the following quantities of infant formula for use exclusively within this Institution by infants who have to be fed on breast-milk substitutes (Social welfare cases, orphans, sick infants, etc.):

No. of Infants	Average Stay (Days)	Supply Requested		
		Brand	Size	No. of tins

I confirm that the Company has drawn my attention to the relevant extracts overleaf, quoted from the WHO International Code of Marketing of Breast-Milk substitutes and the WHO Guidelines concerning the Main Health and Socio-economic Circumstances in which infants have to be fed on breast-milk substitutes, and this request is consistent with the same. These supplies will not be used for routine use by healthy newborn babies, nor will they be given to mothers as free samples.

Date of request

Authorized signature

Name (please PRINT)

Institution

Address

Date of Receipt

Authorized signature

Name (please PRINT)

Position

Name of Nestlé representative

.....

.....

NOTE :

If the infant formula to be supplied is for use outside the Institution, please address a separate request to the Company giving the following details : name of infant, age, dependence on breast-milk substitute (e.g. 25, 50, 75, 100 %), how long supply will be needed, name of health worker supervising the infant, and any other relevant details. The Company decision will be communicated to the person responsible for the request.

INFANT FORMULA SUPPLIES

Extracts from
The International Code of Marketing of Breast-Milk Substitutes
(WHO, Geneva, 1981)

- ARTICLE 3 Definition
"Supplies" means quantities of a product (infant formula) provided for use over an extended period free or at a low price, for social purposes, including those provided to families in need.
- ARTICLE 6.6 Donations or low-price sales to institutions or organizations of supplies of infant formula or other products within the scope of this Code, whether for use in the institutions or for distribution outside them, may be made. Such supplies should only be used or distributed for infants who have to be fed on breast milk substitutes. If these supplies are distributed for use outside the institution this should be done only by the institutions or organizations concerned. Such donations or low-price sales should not be used by manufacturers or distributors as a sales inducement.
- ARTICLE 6.7 Where donated supplies of infant formula or other products within the scope of the Code are distributed outside an institution, the institution or organization should take steps to ensure that supplies can be continued as long as the infants concerned need them. Donors, as well as institutions or organizations concerned, should bear in mind this responsibility.
-

The World Health Organisation Guidelines concerning the main health and socio-economic circumstances in which infants have to be fed on breast-milk substitutes (April 1986) state that there are a number of situations - fortunately relatively infrequent - where infants cannot, or should not, be breast-fed. The choice as to the best alternative to breast-feeding depends on the nature of the circumstances :

- 1) Infants who cannot be fed at the breast (e.g. sucking difficulties) but for whom breast milk remains the food of choice.

If possible these infants should be fed expressed breast milk provided by their own mothers or by a wet-nurse, or by milk from a breast-milk bank.

- 2) Infants who should not receive breast milk or breast-milk substitutes based on cows milk (e.g. due to rare metabolic disorders)

Special preparations will be required in these cases.

- 3) Infants for whom breast milk is not available, for whatever reason.

Commercially-produced infant formula represents an important nutritional advance for these infants.

The Guidelines recommend that breast-milk substitutes be made accessible and used in ways that do not interfere with the protection and promotion of breast-feeding. For this reason, Nestlé supplies infant formula to hospitals and other institutions, only for infants who, in the judgement of the health professionals concerned, need to be bottle-fed.

From : WHO Document A39/8 Add. 1, April 1986

Complaint Form

These instructions reflect the public commitment made by Nestlé to conduct its marketing of infant formula in accordance with the Principles and Aim of the World Health Organization International Code of Marketing of Breast-Milk Substitutes. This form may be used by third parties to investigate possible violations. Complaints may be sent directly to Nestlé or to the International Association of Infant Food Manufacturers (IFM), (see address below). Use of this form will help the Company by supplying the kind of information it needs to determine whether Nestlé marketing practices are in conformity with the Code.

1. Country _____ City or village _____

2. Description of apparent violation :
 - a) Brand name of product involved _____

 - b) Place (and address if possible) where violation occurred (for example, name of particular medical institution or store, or particular newspaper or radio station)

 - c) Date and time when violation was observed _____

 - d) Description of violation (in as much detail as possible)

 - e) Persons responsible for violation (if known) _____

 - f) Part of Nestlé Company responsible (if known) _____

- g) Names and addresses of any other witnesses who can be approached in investigating the complaint (if any).

3. Have you had any contact with company officials or with governmental or health authorities about this apparent violation ? Please describe and give names, if known.

4. Other information or comments

5. Name, address and telephone number (if available) of person submitting form (please print or type if possible)

Date

Signature

If possible, please enclose actual evidence (photos, letters, affidavits, tape, recordings, etc.) relating to the activities concerned.

Mail to : **Nearest Nestlé Company Office**

or to

**International Infant Food Manufacturers
Association (IFM)
194 rue de Rivoli
F-75001 Paris
Fax 31 1 44 77 85 62**

LIST OF MATERIALS OF PROFESSIONAL UTILITY
WHICH MAY BE DISTRIBUTED TO INDIVIDUAL HEALTH WORKERS

These materials should be inexpensive, i.e. the value would not constitute an inducement to prescribe infant formula to the detriment of breast-feeding.

Material intended for health workers (including those attending congresses and conferences) will either have a clear educational purpose or be designed to render a genuine service.

NESTEC B-M&N/IN, Vevey is not able to act as a distributor for most such materials. Markets should seek local suppliers, importers or agents, order directly and arrange payments themselves. In no case will NESTEC B-M&N/IN absorb costs of materials for market requirements.

Items may not bear any product brand or message, but may include the company name or logo. Such materials are designed for and addressed to a professional audience, not to the general public.

The following list does not relate to materials, including service items, that may be requested by, or donated to institutions or associations.

I. In-service aids and professional educational materials :

- charts for recording weight, height or other anthropometric indications
- wall charts, desk charts or calculators providing reference data (on subjects such as : gestation, evaluation of the newborn, stage of development of the foetus or of the child, stages of pregnancy, immunisation, child health and care, etc...)
- materials or equipment designed to assist with record keeping such as :
 - diaries, year planners and calendars,
 - slide storage pockets or boxes,
 - Cardex indices,
 - easybinders or boxes,
 - congress bags or document cases.
- material for the health workers' own continuing education
- personalised non product-related prescription pads or notepads.
Since these would be issued sheet by sheet to the general public, no product brand may appear.

II Materials and equipment for individual health workers :

Materials and equipment to help health workers in the diagnosis and or treatment of obstetric, paediatric and/or nutritional problems according to following list :

- measuring tapes (e.g. arm/head circumference),
- length measuring devices,
- weighing scales - babies and children,
- skinfold calipers,
- sphygmomanometers,
- cold light,
- reanimation lamp,
- head mirror,
- otoscope
- stethoscopes (including obstetric and/or foetal),
- clamp for umbilical cord,
- percussion hammer,
- thermometers,
- tongue depressors,
- vacuum forceps,
- delivery mat,
- breast-milk pump.

Similar low-cost professional items may be considered after consultation with Nestec B-M&N/IN, Vevey.

Clinical Validation Policy

Objectives:

- Monitor product performance under normal conditions of use, on a representative and on-going basis, in order to establish a solid data base
- Monitor comprehension of, and conformity with, preparation instructions, particularly among users in the lower socio-economic groups

Principles:

In conformity with our commitments under the International Code, the following principles have to be respected when clinical validation trials are conducted on infant formula:

- since breast-feeding is to be encouraged for all babies, only those babies who have to be fed on a breast-milk substitute may participate in trials - these may, however, include babies whose mothers, after consultation with a doctor, have chosen not to breast-feed, or chosen to discontinue breast-feeding, or chosen to complement breast-feeding
- sufficient infant formula must be provided for infants participating in the trials, to cover their needs until they reach the age of 6 months (follow-up formula, from a minimum age of 4 months up to a maximum age of 12 months)
- clinical validation trials are not to be used as a sales inducement
- all clinical validation trials must be conducted under medical supervision according to an agreed protocol, which is to be completed and a copy given to Nestlé for each completed study (a basic protocol and data recording sheet is enclosed - annex 1 - but the protocol may be extended at the doctor's discretion)
- the health status of all babies participating in clinical validation trials should be checked by the supervising doctor at the beginning and end of the trial.
- both the mother and the supervising doctor must sign an agreement to the terms of the trial (enclosed text - annex 2 - to be adapted according to local requirements)

- products for clinical validation trials are provided only on condition that the above principles are respected (if necessary the number of trials should be limited or even totally eliminated if they are not properly documented by the doctor).
- knowledge of correct preparation procedures can be tested with the help of the simple check-list shown in annex 3

Establishing the data-base

In order to establish a valid data base, an adequate number of trials will need to be conducted by a representative cross section of doctors, covering the different social groups who use infant formula. Quantities of infant formula allocated for clinical validation trial purposes, are to be strictly limited and subject to approval by the Nestlé Market Manager or his deputy. It is recognized that quantities required will be proportionally greater in relation to sales for new products than for well-established products. In case of doubt, Nestec B-M&N/IN must be consulted.

An annual report, summarising the results of all clinical validation trials by product - annex 5.4, must be sent to the SBU with copy to Zone Management by January 31st each year.

Administration:

Products provided for clinical validation must be clearly marked with a sticker in the appropriate language(s), "Formula provided for Clinical Validation - NOT FOR RESALE"

The quantities provided for individual Clinical Validation, will vary from case to case according to the feeding pattern (e.g. exclusive formula feeding vs. mixed breast and formula feeding), the age at which the trial begins and ends, and the type of formula (e.g. special formulas, routine starter formula, follow-up formula). As an indication, *exclusive* formula feeding from birth to the age of six months will require approximately 20 kg, while the use of follow up formula as the liquid part of the weaning diet from the age of 6 months to the age of 12 months, would require approximately 15 kg.

CLINICAL VALIDATION PROTOCOL

Baby's name :

Sex :

Date of birth :

Birth weight :

Product provided :

Please enter following details on growth chart :

Beginning of trial :

Age (BT)

Height

Body weight

Head circumference

Feeding Pattern from birth to beginning of trial :

- Breast only

• Breast & Formula

• Breast and other Foods

• Formula only

• Formula and other Foods

B

BF

BOF

F

FOF

Feeding Pattern during trial :

BF/F/FOF

End of Trial :

Age (ET)

Height

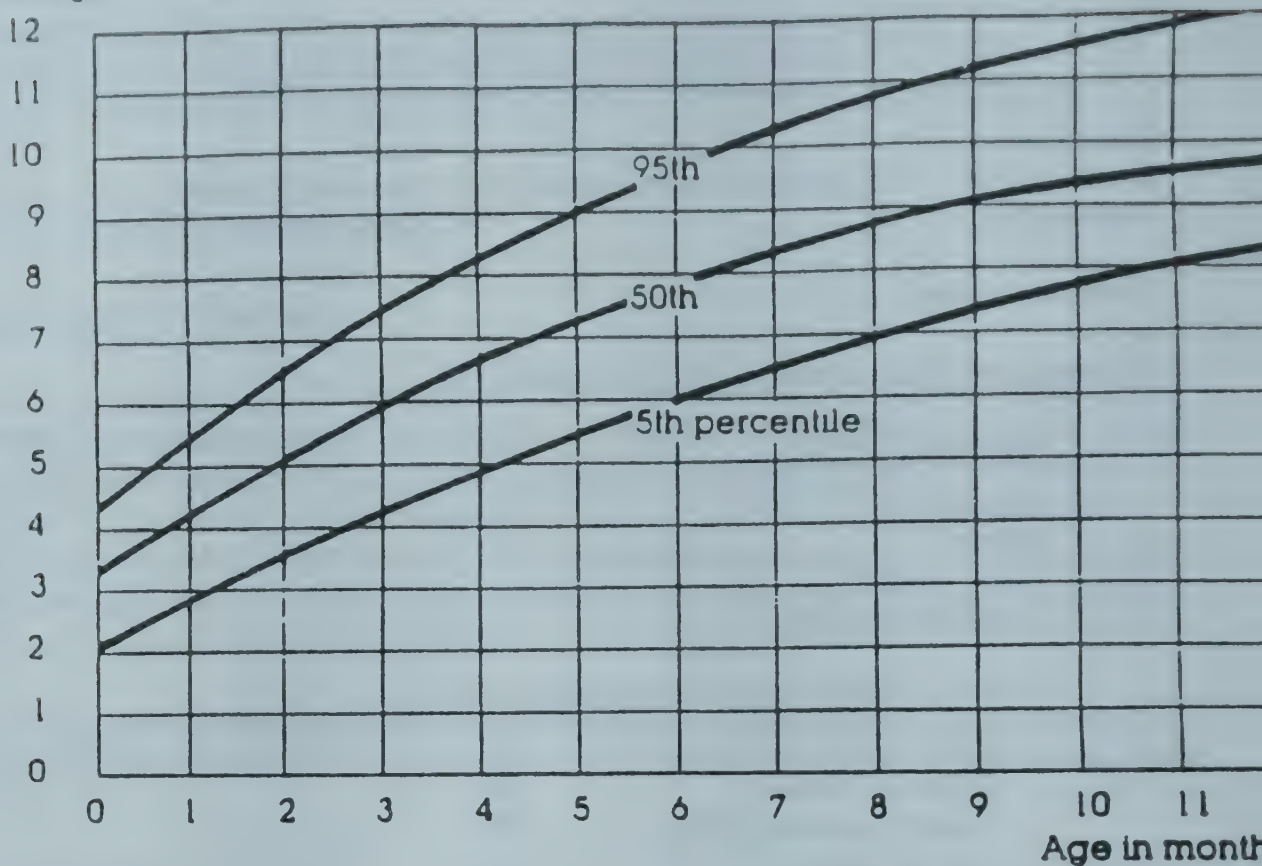
Body weight

Head circumference

Clinical Notes :	Yes	No
Was Formula well tolerated ?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks...		
Was the trial completed ?	<input type="checkbox"/>	<input type="checkbox"/>
Did the Baby suffer any of the following symptoms during the trial ?	<input type="checkbox"/>	<input type="checkbox"/>
• Spitting-up	<input type="checkbox"/>	<input type="checkbox"/>
• vomiting	<input type="checkbox"/>	<input type="checkbox"/>
• Colic	<input type="checkbox"/>	<input type="checkbox"/>
• Constipation	<input type="checkbox"/>	<input type="checkbox"/>
• Loose Stools	<input type="checkbox"/>	<input type="checkbox"/>
• Diarrhoea	<input type="checkbox"/>	<input type="checkbox"/>
• Other (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>
• Did the Baby's condition require treatment during the trial (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>

Weight for age – WHO Standards, Geneva 1981

Weight (In kg)



Feeding Problems

Indicate if any of the symptoms below were observed and linked with the use of the product.

	Spitting-up	Vomiting	Colic	Loose stools	Constipation	Diarrhea
0-1						
1-2						
2-3						
3-4						
4-5						
5-6						
6-9						
9-12						

Doctors' Observations

CLINICAL VALIDATION AGREEMENT

Nestlé agrees to provide (brand) infant formula to (mother's name) for her baby (name) from (beginning date of trial).

Nestlé understands that during this period baby (name) will be under the care of (doctor's name) and he/she will examine baby (name) at the beginning and end of the trial.

Nestlé is providing (brand) infant formula for (baby's name) on the understanding that (mothers name) is aware of the superiority of breast-feeding, has chosen to use an infant formula after consultation with (doctor's name), and will be given full instruction for the safe use of infant formula.

(Doctor's name) agrees to give Nestlé a completed clinical validation protocol covering the progress of (baby's name) during the above period.

We have read and accept the above terms :

Doctor's signature :

Mother's Signature :

Address :

Address :

Date :

Date :

KNOWLEDGE OF CORRECT PREPARATION PROCEDURES
(Selected mothers)

	Spontaneous Knowledge		Prompted Knowledge (comprehension of label instructions)	
	Yes	No	Yes	No
Wash bottle, teat & cap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boil bottle, teat & cap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boil drinking water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pour exact amount of boiled water into feeding bottle (see feeding table)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Correct number of scoops of powder (see feeding table)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shake bottle until powder dissolved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANNUAL VALIDATION PROTOCOL REPORT (Year)

Brand :

Quantity of Product used for Clinical Validation Trials (kg) :

Number of babies participating :

Number of babies completing trials :

Number of doctors participating :

Average length of trial (months) :

- Results :**
1. Brief description of general acceptance, tolerance, weight and height development
 2. Number of incidents of illness requiring treatment, and whether these were considered to be related to the infant feeding pattern
 - Diarrhoea
 - Respiratory
 - Other
 3. Knowledge of correct Formula Preparation Procedures (Number of mothers tested, spontaneous knowledge, prompted knowledge, comprehension of written and/or pictorial label instructions).

Conclusions/Recommendations

IMPORTANT REMINDER TO ALL RETAILERS OF NESTLE INFANT FORMULA

In May 1981 the 34th World Health Assembly adopted the World Health Organization (WHO) International Code of Marketing of Breast-Milk Substitutes. This Code is intended to contribute to the provision of safe and adequate nutrition for babies in particular by encouraging breast-feeding and ensuring that appropriate breast-milk substitutes are used only when necessary. Nestlé has publicly stated its support for the Code and has issued instructions to all its marketing personnel to ensure that Nestlé marketing practices are in accord with the Principles and Aim of the Code.

The Nestlé Instructions relate to the following infant formula products
..... (insert brand names), and are the only products Nestlé markets as suitable for use as breast milk substitutes in (insert name of country).

We should like to draw your attention particularly to the WHO Code article 5.3 and the relating Instructions to Nestlé personnel.

WHO CODE ART. 5.3

5.3 In conformity with paragraphs 1 and 2 of this Article, there should be no point-of-sale advertising, giving of samples, or any other promotion device to induce sales directly to the consumer at the retail level, such as special displays, discount coupons, premiums, special sales, loss-leaders and tie-in sales, for products within the scope of this Code. This provision should not restrict the establishment of pricing policies and practices intended to provide products at lower prices on a long-term basis.

NESTLE INSTRUCTION

5.3 Sales promotion activities at the retail level on behalf of infant formula* are not permitted, i.e. :

- no coupon redemption scheme
- no raffles or lotteries
- no point of sale promotions (i.e. deals, gifts, special displays, including display contest)
- no in-store demonstrations
- no company-induced price offers at the retail level (consumer discounts, loss leaders, tie-in-sales)

Note : This does not prevent the implementation of a normal trade price structure.

This policy shall be communicated to wholesalers and retailers of Nestlé infant formula products who must be reminded that it is company policy to prevent promotion of infant formula at the point-of-sale (see Attachment 6). It is the sales-staff's responsibility to maintain stock rotation and to ensure clean and tidy presentation of infant formula at the point-of-sale where it is needed. Use of shelf or bin markers clearly indicating product name and price is permitted, but promotional advertising is not.

* Follow-up formulae which have the same brand name as starter formula, (e.g. Nan 1 and Nan 2) are subject to the same marketing restrictions as starter formula.

As you will see it is Nestlé policy to prevent the promotion of infant formula at the point-of-sale, since this might have the effect of persuading a mother not to breast-feed, or to discontinue breast-feeding too early.

Nestlé is confident that in the interests of mothers and babies, retailers will respect Nestlé policy in this regard, and that they will not carry out any advertising or sales promotion of infant formula, other than normal display as foreseen in the Nestlé Instructions.

Your co-operation in this matter is greatly appreciated.



COUNTRY INDICES

Latin America and Caribbean

Africa

Asia and Oceania

Middle East

Europe

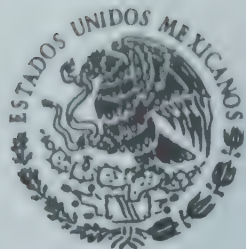


OFFICIAL RESPONSE OF GOVERNMENTS

Country Index

1.1 LATIN AMERICA AND THE CARIBBEAN

	Page
• Mexico (<i>with back translation</i>)	53
• Colombia (<i>with back translation</i>)	55
• Peru (<i>with back translation</i>)	57
• Venezuela (<i>with back translation</i>)	59
• Ecuador (<i>with back translation</i>)	61
• Bolivia (<i>with back translation</i>)	63
• Paraguay (<i>with back translation</i>)	65
• Panama (<i>with back translation</i>)	67
• Guyana	69
• Dominican Republic (<i>with back translation</i>)	70
• Trinidad and Tobago	72
• Saint Vincent and The Grenadines	73
• Antigua and Barbuda	74



SECRETARIA DE SALUD

DIRECCION GENERAL DE
SALUD REPRODUCTIVA
Av. Insurgentes Sur # 1397, 6º piso
Col. Insurgentes Mixcoac
03920 México, D.F.

México, D.F. a 5 de abril de 1999

CARTA DE RECONOCIMIENTO

Con apego al derecho de todo niño y toda mujer embarazada y lactante a una alimentación adecuada como medio de lograr y de conservar la salud, el Gobierno de México a través de la Secretaría de Salud, desde el inicio de la presente década ha venido desarrollando Programas y Estrategias para rescatar y fomentar la práctica de la lactancia materna, entre las cuales destaca por su importancia, la iniciativa Hospital Amigo del Niño y de la Madre que ha colocado a nuestro país a la vanguardia a nivel Internacional.

En el acuerdo firmado ante el Secretario de Salud, el 31 de mayo de 1995, el Consejo Nacional de Fabricantes y Distribuidores de Fórmulas Infantiles se comprometieron a cumplir con la Norma Oficial Mexicana para la Atención de la Mujer durante el Embarazo, Parto y Puerperio y del Recién Nacido y respetar el Código Internacional de Comercialización de Sucedáneos de la Leche Materna, así como a no promover las fórmulas lácteas de inicio y el uso de biberones, a cancelar la entrega gratuita de suministros o muestras de sucedáneos de la leche materna, y a eliminar su venta a precio reducido en instituciones y unidades de salud públicas y privadas.

Merece un reconocimiento especial la Compañía Nestlé S.A. de C.V. en México por el esfuerzo que ha realizado hasta la fecha para cumplir con este compromiso y un agradecimiento por la desinteresada colaboración que ha tenido con la Secretaría de Salud y en especial con Dirección General de Salud Reproductiva en la difusión y promoción de los programas y acciones de salud.

ATENTAMENTE
SUFRAGIO EFECTIVO NO REELECCION
EL DIRECTOR GENERAL

DR. GREGORIO PEREZ-PALACIOS

c.c.p.- Dr. Roberto Tapia Conyer. Subsecretario de Prevención y Control de Enfermedades.
Presente

GPP/ACO/GVS/

SECRETARY OF HEALTH

General Administration
for Reproductive Health
Ave. Insurgentes Sur #1397, 6th Fl.
Col. Insurgentes Mixcoac
03920 Mexico City

Mexico City, 5 April 1999

CERTIFICATE

Affirming the right of every child and every pregnant and lactating woman to appropriate nutrition as a means of attaining and maintaining good health, since the beginning of the present decade the Mexican Government, through its Ministry of Health, has developed Programmes and Strategies for reviving and promoting the practice of breast-feeding. One of the most noteworthy is the Friend of Mother and Child Hospital initiative, placing our country at the forefront of the international scene.

In the convention signed in the presence of the Secretary of Health on May 31st, 1995, the National Council of Manufacturers and Distributors of Infant Formulas formally undertook to comply with the Official Mexican Norms for Care of Mothers during Pregnancy, Childbirth and Infant Care and of Newborns. They also agreed to respect the International Code of Marketing of Breast-milk Substitutes; not to promote the use of starter formulas and bottle-feeding; to refrain from free distribution and sampling of breast-milk substitutes; as well as to stop all low-price sales in public and private health institutions or establishments.

Special recognition must be given to Nestlé Mexico for their efforts made to date to honour this commitment, and thanks for their co-operation with the General Administration of Reproductive Health in propagating and promoting health programmes and activities.

Sincerely,
EFFECTIVE SUFFRAGE, NOT RE-ELECTION
THE GENERAL DIRECTOR

DR. GREGORIO PEREZ-PALACIOS

cc. Dr. Roberto Tapia Conyer, Under-Secretary for Prevention and Control of Disease. Present.



CONSTANCIA

La Dirección General de Promoción y Prevención hace constar que la Compañía Nestle de Colombia S.A viene cumpliendo y acogiendo los requerimientos hechos en el monitoreo que el Ministerio de Salud realizó en 1997 al cumplimiento del Código Internacional de Comercialización de Sucedáneos de la Leche Materna y el Decreto 1397 de 1992, manifestando su disposición y compromiso para realizar los correctivos necesarios.

Esta constancia se expide a solicitud del interesado, a los veintiséis (26) días del mes de febrero de 1999.

MARGARITA RONDEROS TORRES
Directora General de Promoción y Prevención

Republic of Colombia

MINISTRY OF HEALTH

General Administration for Promotion and Prevention

DECLARATION

The General Administration for Promotion and Prevention declares that the company Nestlé Colombia is currently complying with and applying the requirements resulting from the monitoring carried out in 1997 by the Ministry of Health of compliance with the International Code of Marketing of Breast-milk Substitutes and Decree 1397 of 1992, demonstrating its willingness and commitment to undertake the corrective action necessary.

This statement was delivered by request of the interested party, on February 26th, 1999.

MARGARITA RONDEROS TORRES
General Director for Promotion and Prevention



MINISTERIO DE SALUD
DESPACHO MINISTERIAL


CONSTANCIA

El Ministerio de Salud del Perú.

Deja constancia que la compañía **NESTLE PERU S.A.**, a través de sus prácticas comerciales y publicidad cumple con los lineamientos básicos que desarrolla el Gobierno Peruano en el cumplimiento del Código Internacional de Comercialización de los Sucedáneos de la Leche Materna.

Asimismo, se resalta la permanente disposición de la mencionada empresa en la promoción y difusión de la Norma Nacional e Internacional





DR. MARINO COSTA BAUER
Ministro de Salud

Lima, 9 de Diciembre de 1998.

MINISTRY OF HEALTH
Head Office

STATEMENT

The Ministry of Health of Peru

We hereby declare that NESTLÉ PERU S.A. complies in commercial and advertising practices with the basic guidelines of the Government of Peru in application of the International Code of Marketing of Breast-milk Substitutes.

Furthermore, the above-mentioned company is always ready and willing to promote and propagate the national and international norms.

Dr. MARINO COSTA BAUER

Minister of Health

Lima, December 9th, 1998

MINISTRY OF HEALTH AND SOCIAL SECURITY
Bolivia

Translated by Nestec S.A. Translation Service
Deborah De Los Santos-Lockwood – ETI / U. Geneva - 1986



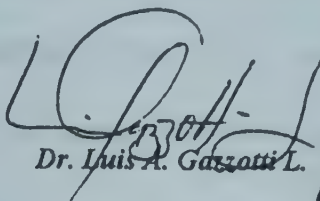
MINISTERIO DE SANIDAD
Y
ASISTENCIA SOCIAL

No. 5/N.

A QUIEN PUEDA INTERESAR

Quien suscribe, *Director de Atención a la Madre, Niño y Adolescente del Ministerio de Sanidad y Asistencia Social*, hace constar que la *Empresa Nestlé de Venezuela, S.A.*, a través de su política de comercialización de sucedáneos de la leche materna, no utiliza la práctica de donación de los mismos, acogándose así, *al cumplimiento del Código de Etica de la Organización Mundial de la Salud OMS, según información obtenida para fines de 1998.*

En Caracas, a los siete días del mes de Mayo de mil novecientos noventa y nueve.


Dr. Luis A. Gazzotti L.

LAGL/bnt.

Mayo 1999.



REPUBLIC OF VENEZUELA

MINISTRY OF HEALTH AND
SOCIAL WELFARE

TO WHOM IT MAY CONCERN

The undersigned, *Director of Mother, Child and Adolescent Care of the Ministry of Health and Social Welfare*, hereby declares that in its policy of marketing of breast-milk substitutes the Company *Nestlé of Venezuela, S.A.* does not practice donations of the above mentioned, thus complying with the *Code of Ethics of the World Health Organization*, according to information obtained at end 1998.

Caracas, May 7 1999

Dr. Luis A. Gazzotti L.



Of. No.

MINISTERIO DE SALUD PUBLICA

Quito, a de

de 19

Sección:

Asunto:

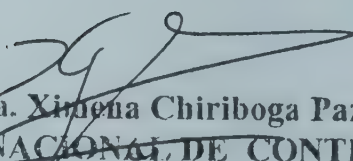
Quito, 6 de abril de 1999

Srs. NESTLE ECUADOR S.A.

De nuestras consideraciones:

La Dirección Nacional de Control Sanitario, certifica que Nestlé Ecuador S.A. cumple con las disposiciones establecidas en el Código de Etica de la Organización Mundial de la Salud y en el Decreto Ejecutivo 2215, referente a las prácticas de comercialización, promoción y publicidad de los sucedáneos de la leche materna.

Muy atentamente,


Dra. Ximena Chiriboga Pazmiño
DIRECTORA NACIONAL DE CONTROL SANITARIO

MSP/bt.99-IV-06



Ministry of Public Health

Quito, 6th April 1999

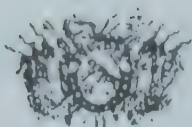
To: NESTLE ECUADOR S.A.

On our part:

The National Administration of Health Control certifies that Nestlé Ecuador S.A. complies with the provisions laid down in the Code of Ethics of the World Health Organization and in Executive Decree 2215, concerning marketing, promotion and advertising practices in regards to breast-milk substitutes.

Sincerely,

Dr. Ximena Chiriboga Pazmiño
NATIONAL DIRECTOR FOR HEALTH CONTROL



DESPACHO

MINISTERIO DE SALUD Y PREVISION SOCIAL
Bolivia

EL MINISTERIO DE SALUD Y PREVISION SOCIAL DE BOLIVIA

CERTIFICA:

Que la Compañía Nestlé Bolivia S.A., mediante sus actividades comerciales se encuentra dentro del marco, en lo referente al Convenio suscrito por el Gobierno Boliviano ante la Organización Mundial de la Salud sobre la comercialización de los sucedáneos de la Leche Materna.

Cabe mencionar que la actuación de la mencionada Empresa está acorde con el cumplimiento y difusión del Código OMS y la pronta reglamentación de una Norma Nacional.

La Paz, diciembre 14 de 1998

Dr. Jaime Tellerio Guzmón
DIRECTOR UNIDAD NACIONAL
Atención a la Mujer y el Niño

THE MINISTRY OF HEALTH AND SOCIAL SECURITY OF BOLIVIA

HEREBY CERTIFIES

that the company Nestlé Bolivia, S.A. carries out its commercial activities within the framework of the convention agreed to by the Government of Bolivia with the World Health Organization concerning marketing of Breast-milk Substitutes.

It should be noted that the above company acts in accordance with the compliance and propagation of the WHO Code and in line with the impending regulations of National Norms.

La Paz, December 14, 1998

Dr. Jaime Tellerio Guzmán
Director National Unit
Maternal and Child Care



Ministerio de Salud Pública y Bienestar Social
Secretaría General

Resolución S.G. N° 70

POR LA CUAL EL MINISTERIO DE SALUD PÚBLICA Y BIENESTAR SOCIAL CERTIFICA QUE LA EMPRESA **NESTLE** DEL PARAGUAY HA DADO CUMPLIMIENTO A LOS PRINCIPIOS Y NORMAS TÉCNICAS VIGENTES EN EL PAÍS, EN LO REFERENTE A LA COMERCIALIZACIÓN DE SUSTITUTOS DE LA LECHE MATERNA.

Asunción, 4 de mayo de 1999

VISTA:

La nota de fecha 13 de abril del corriente año presentada al Ministerio de Salud Pública y Bienestar Social por **NESTLE** del Paraguay; y

CONSIDERANDO:

Que las instrucciones de **NESTLE** del Paraguay en el cumplimiento de la comercialización de sustitutos de la leche materna están de acuerdo con las normas técnicas, jurídicas y los principios vigentes en el país,

POR TANTO, teniendo en cuenta el marco jurídico de los Artículos 4° y 15° del Código Sanitario, en concordancia con el Decreto N° 16.525/93 y en uso de sus atribuciones;

**EL MINISTRO DE SALUD PÚBLICA Y BIENESTAR SOCIAL
RESUELVE:**

Artículo 1°. Certificar que la Empresa **NESTLE** del Paraguay cumple con los Principios y Normas Técnicas vigentes en el país, en lo referente a la comercialización de Sustitutos de la Leche Materna.

Artículo 2°. Comunicar a quienes corresponda y cumplida, archivar.



DR. MARTIN ANTONIO CHIOLA V.
MINISTRO

/lbm

*Ministry of Public Health and Social Welfare
General Secretariat*

G.S. Resolution # 10

THE MINISTRY OF PUBLIC HEALTH AND SOCIAL WELFARE HEREBY CERTIFIES THAT THE NESTLÉ COMPANY OF PARAGUAY HAS COMPLIED WITH THE TECHNICAL PRINCIPLES AND NORMS CURRENTLY IN FORCE IN THE NATION, REGARDING MARKETING OF BREAST-MILK SUBSTITUTES.

Asunción, May 4 1999

In view of:

The note of April 13th, 1999 delivered to the Ministry of Public Health by Nestlé Paraguay;

Whereby:

Instructions given by Nestlé Paraguay for carrying out marketing of breast-milk substitutes comply with the technical and legal norms and with the policies in force in the country;

Thus, in line with the legal provisions of Articles 4 and 15 of the Public Health Code, in accordance with Decree #16.525/93 and empowered by its attributes:

THE MINISTER OF PUBLIC HEALTH AND SOCIAL WELFARE
RESOLVES:

- Article 1: To Certify that the company Nestlé of Paraguay complies with the Principles and Technical Norms in force in the nation concerning marketing of Breast-milk Substitutes.
- Article 2: To communicate the above to those duly entitled, to file in archives.

DR. MARTIN ANTONIO CHIOLA V.

MINISTER


410/DS/99
5 de febrero de 1999

Señor
ENRIQUE ALMASQUÉ
Presidente
Nestlé Región América Central
Ciudad

Señor Almasqué:

El Ministerio de Salud, certifica que la Compañía Nestlé, a través de sus prácticas de comercialización, cumple con los lineamientos del Código Internacional de la OMS y con las normas locales sobre la comercialización de sucedáneos de la leche materna. Asimismo, destacamos la permanente disposición de esta empresa de promover y difundir la norma nacional e internacional en tal sentido.

Atentamente,


DRA. AIDA L. MORENO DE RIVERA
Ministra



/juana

1999: Año de la Reversión del Canal a Panamá

"SALUD IGUAL PARA TODOS"

Ministry of Health
Panama
Head Office

February 5 1999

MR. ENRIQUE ALMASQUÉ
President
Nestlé Central America Region
In this City

Mr. Almasqué,

The Ministry of Health certifies that in its marketing practices the Nestlé Company complies with the directives of the WHO International Code and with the local norms regarding marketing of breast-milk substitutes. Moreover, we emphasize this company's permanent willingness to promote and disseminate the national and international norms in regard to this subject.

Sincerely,

Dr. Aida L. Moreno de Rivera
Minister

1999: Year of the Reversion of the Canal to Panama

"EQUAL HEALTH FOR ALL"

P.O. Box 2048, Panama, Panama



Ref. No.

CMO-14/5/99

Chief Medical Officer
Ministry of Health

Brickdam, Georgetown
Guyana, South America.
Tel: 61224

13th May, 1999

TO WHOM IT MAY CONCERN
CODE COMPLIANCE CERTIFICATE

Nestle` has presented current marketing practices for the breast-milk substitutes they market in GUYANA to the Chief Medical Officer at the Ministry of Health, on May 13, 1999.

The Chief Medical Officer confirms that the practices presented are in line with Guyana's Code for the Marketing of Breast-Milk Substitutes.

Signed on this 13th Day of May, 1999, at the Ministry of Health, Georgetown, Guyana.

Sincerely yours,

Dr. Rudolph O. Cummings,
CHIEF MEDICAL OFFICER



Comisión Nacional de Lactancia Materna

SSLM-038 -99

Fundada en 1984

Santo Domingo, D.N.

18 de febrero 1999.-

PRESIDENTE

Secretaría de Estado de
Salud Pública y Asistencia
Social (SESPAS)

COORDINADORA NACIONAL:

Dra. Josefina García-Coén

MIEMBROS:

Secretaría de Estado de
Trabajo
Secretaría de Estado de
Educación y Cultura
Secretaría de Estado de
Industria y Comercio
Secretaría de Estado de
Agricultura
Dirección General de
Telecomunicaciones
Idam
Profamilia
Sociedad Dominicana de
Pediatría
Sociedad Dominicana de
Perinatología
Sociedad Dominicana de
Obstetricia
Asociación Médica
Dominicana
Dirección General para la
Promoción de la Mujer
Conaspo
Liga de la Leche
Caritas
Asociación Dominicana de
Enfermeras Graduadas
Cenami
Conasami
Centro de Integración
Familiar (CIF)
Development Associates
Comisión de Espectáculos
Públicos
Universidad Autónoma de
Santo Domingo
Instituto Dominicano de
Seguros Sociales

ASESORES

UNICEF
OMS/OPS
AID
FNUAP
Plan Internacional
INFAN

SEÑOR

NORBERTO ROMERO

Presidente y Gerente General NESTLE
República Dominicana.

Distinguido Señor Romero:

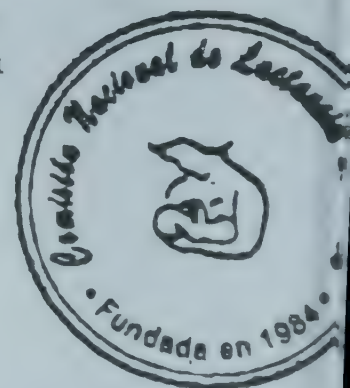
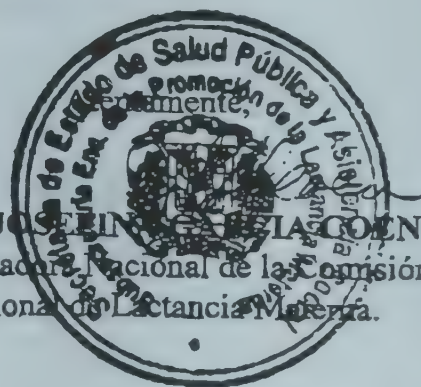
Después de saludarle muy cortésmente tenemos a bien informarle que las prácticas observadas durante la celebración del Monitoreo para verificar el cumplimiento del Código de la Organización Mundial de la Salud (OMS), para la Comercialización de los Sucedáneos de la Leche Materna en 1997, mostró que la institución que usted dirige había incurrido en varias violaciones al Código de la OMS; que una vez analizada a profundidad cada violación, encontramos que en lo que concierne a las fórmulas infantiles eran mínimas y relacionadas a las etiquetas; la mayoría correspondían a acciones publicitarias de productos populares las cuales ya han sido corregidas, y en lo que concierne a las fórmulas infantiles eran mínimas las violaciones.

Nos place comunicarle que a partir del año 1999 se hará el Monitoreo del Cumplimiento de la Ley 8-95 no del Código de Comercialización de los Sucedáneos de la Leche Materna de la OMS.

Sin más por el momento.

DRA. JOSEFINA GARCÍA COÉN
Coordinadora Nacional de la Comisión
Nacional de Lactancia Materna.

JGC:ls.



Secretaría de Estado de Salud Pública y Asistencia Social,
Edificio de la Dirección General de Promoción y Educación para la Salud (DIGPRES),
Calle Santiago No. 4, casi Esq. Dr. Delgado. Tel. (809) 221-2700 (Ext. 225 y 226), Fax (809) 685-1979

National Commission for Breast-Feeding
Founded 1984

Santo Domingo, D.N.
February 18th, 1999

Mr. NORBERTO ROMERO
President and General Manager Nestlé
Dominican Republic

Dear Mr. Romero,

We hereby inform you that procedures during the Monitoring carried out in 1997 to verify International Code of Marketing of Breast-milk Substitutes compliance showed that your company had committed several violations of the WHO Code. After an in-depth study of each violation, we have found that in regard to infant formula, these violations were minimal and concerned labelling. The majority were related to advertising activities of popular products, and have since been corrected. The violations related to infant formula were minor.

We are pleased to inform you that as of 1999, we shall be monitoring Compliance with Law 8-95, and not with the WHO Code of Marketing of Breast-milk Substitutes.

Yours sincerely,

Dr. Josefina García Coen
National Co-ordinator for the National
Commission for Breast-Feeding

Secretary of State for Public Health and Welfare
General Administration for Health Promotion and Education (DIGRES) Building
Calle Santiago # 4 Esq. Dr. Delgado, Tel. 809 221-2700 Extn. 225 & 226, Fax 809 685-1979



MINISTRY OF HEALTH
10-12 Independence Square
Port-of-Spain

Tel: 627-0010
Fax: 623-9528

10th March, 1999

CODE COMPLIANCE CERTIFICATE
FOR MARKETING OF INFANT FORMULAE

The government of Trinidad has implemented the International Code of Marketing of Breast-milk Substitutes (WHO) 1988 through the following measure.

The Breastfeeding Policy of Trinidad and Tobago – 1993 which is implemented at the Nation's Health Centres and Hospitals.

Nestle has presented to the officials at the Ministry of Health on Monday 28th December, 1998, the current marketing practices for the breast-milk substitutes which are marketed in Trinidad and Tobago.

The Ministry of Health confirms that the practices presented by Nestle are in line with the Breastfeeding Policy of Trinidad and Tobago.

The Ministry of Health congratulates Nestle for keeping the marketing practices for infant formulae and breast-milk substitutes in line with the International Code of Marketing of Breast-milk Substitutes and the Breastfeeding Policy of Trinidad and Tobago.

.....
Dr. Pooran Ramlal
Principal Medical Officer
Community Services

PRINCIPAL MEDICAL OFFICER
COMMUNITY SERVICES

Ref. No.
In replying the date and
number above of this letter
should be quoted.



MINISTRY OF HEALTH & THE ENVIRONMENT
Ministerial Building
Kingstown
St. Vincent & the Grenadines

7th June 1999

Nestle has presented current marketing of Infant Formula products in accordance with the W.H.O Code as implemented by St. Vincent, to the responsible officials at the Ministry of Health and the Environment on 21st April, 1999.

The Minister of Health confirms that the practices presented are in compliance with the St. Vincent and the Grenadines National Code/Regulations.

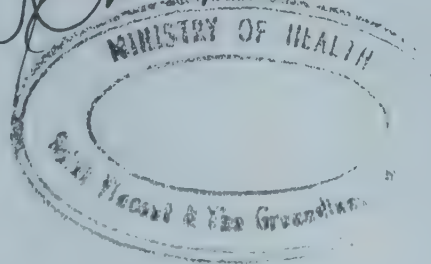
Place: St. Vincent and the Grenadines

Date: 21/04/99

Title: Minister of Health and the Environment

Signature:

Official Stamp:





GOVERNMENT OF ANTIGUA AND BARBUDA

MINISTRY OF HEALTH AND CIVIL SERVICE AFFAIRS

Cecil Charles Building
Cross Street, St. Johns, ANTIGUA, W.I.
Tel: (268)462-5522
Fax: (268)462-5003

Nestle has presented current marketing practices for the breast-milk substitutes they market in Antigua & Barbuda to the responsible officials at the Ministry of Health on 21st April, 1999.

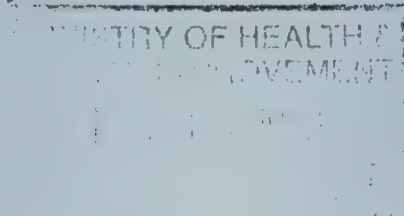
The Minister of Health confirms that the practices presented are in line with the Antigua & Barbuda National Code/Regulations.

Place: Antigua and Barbuda

Date: 14th May, 1999

Title: Minister of Health & Social Improvement

Signature:

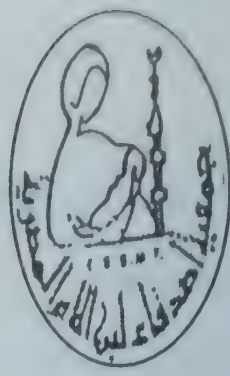


OFFICIAL RESPONSE OF GOVERNMENTS

Country Index

1.2 AFRICA

	Page
• Egypt (<i>with back translation</i>)	76
• South Africa	78
South African Provinces:	
- Mpumalanga	80
- Free State	81
- Northern Cape	82
• Kenya	83
• Madagascar (<i>with back translation</i>)	85
• Angola (<i>with back translation</i>)	87
• Zimbabwe	89
• Rwanda (<i>with back translation</i>)	90
• Burundi (<i>with back translation</i>)	92
• Congo (<i>with back translation</i>)	94
• Comores (<i>with back translation</i>)	96
• Djibouti (<i>with back translation</i>)	98



السادة/ المكتب العلمى لشركة نستله
السيد الدكتور/ جورج تادرس

تحية طيبة وبعد ...

يسرنا ان نحيطكم علما انه بناء على الدراسة التى اجرتها الجمعية عن مدى
تطبيق الشريعة القومية لتسويق بدائل لبن الام ... خلال عام ١٩٩٧ - ١٩٩٨ .. ان
الدراسة اثبتت ان شركتكم من اكثر الشركات التى تلتزم بالشريعة .

نهنئكم بهذه النتيجة المشرفة ونرجو ان تظل شركتكم فى مقدمة الشركات المنتجة
لللبان تطبيقا للشريعة .

ونود ان نقدم لسيادتكم خالص الشكر على توزيعكم ميشاق نستله ليعلن سياستها
لتسويق بدائل لبن الام فى المؤتمرات الطبية وكذلك وضع صورة ام ترضع
وليدها على حامل الشركة فى المؤتمرات .

والى مزيد من التعاون بيننا نحو صحة افضل لاطفال مصر .

وتفضلوا بقبول فائق الاحترام ،

رئيس الجمعية

د. ا / احمد السعيد يونس



امين عام الجمعية

د. / محمود محمد رشاد

تحريرا فى / ٣ / ٢ / ١٩٩٩

Translation
letter From Egyptian Society of Breast Milk Friends
Dated February 3rd, 1999.

To : Dr. George Tadross
Scientific Office Manager - Nestlé Egypt.

We are pleased to inform you that according to the study we did concerning the level of application of the National Code for Marketing of Breast Milk Substitutes during 1997 - 1998, it was found that your company is one of the highest applicators of the National Code.

We congratulate you on this good result , and we hope that your company will remain as a leader of Infant Formulae companies applying the National Code.

Also we would like to thank you for the distribution of Nestlé charter to announce Nestlé Policy for marketing Breast Milk substitutes in the Pediatric Conferences..... and for the displaying of the poster with a Breast Feeding Mother in your company exhibition stand.

We hope for more cooperation for healthier children in Egypt.

Signed by :

Prof. Dr. Ahmed El Saeid Younis
Chairman

Dr. Mahmoud Rashad
General Secretary.



Faks/Fax : (012) 323 7457

Navrae/Enquiry : Ms E M S Jordaan
Directorate Nutrition

Teleks/Telex :
Telefoon/Telephone : (012) 312 0044

Verw/Reference : LB/18/3/3

Mr N G Partington
Medical Services Manager
PO Box 50616
RANDBURG
2125

CODE OF MARKETING OF BREAST-MILK SUBSTITUTES

Your request dated 6 April 1999 concerning the abovementioned refers.

The matter of the Code of Marketing of Breast-milk Substitutes is a complicated and a sensitive one.

As you are aware, the voluntary South African Code of Ethics for the Marketing for Breast-milk Substitutes was negotiated with relevant stakeholders during 1985 to 1986. Since then the status quo was maintained with the exception of the change in the interpretation of the announcement of the price and availability of breast-milk substitutes at the end of 1990. This decision was taken as a result of pressure exercised by the National Newspaper Union which was of the opinion that due to freedom of the press, the announcement of the price and availability of breast-milk substitutes could only be forbidden by way of legislation.

Since the publication of the International Code for the Marketing of Breast-milk Substitutes in 1981, several resolutions were passed as an extension of the stipulations of this Code. Amongst others, breast-milk substitutes have come to be regarded as all forms of foods introduced in an infant's diet prior to the age of six months. According to the South African Code the definition of breast-milk substitutes as being infant formula only, is still being maintained. Likewise the recommended age of 4 to 6 months versus the age of about six months as stated by the WHO is still being maintained in South Africa.

To complicate matters more, it must be borne in mind that many of the stipulations of the South African Code and also of the International Code on which the former was based, are rather vague and difficult to interpret. Transgressions in the so-called grey area of the Code, or the spirit of the Code, are very likely to occur in this field. Publicity given to zoo orphans fed by formula in a bottle or the well-known teddy bear with a baby bottle are examples of such infringements.

The present interpretation of the South African Code of Ethics for the Marketing of Breast-milk Substitutes, especially with respect to the announcement of price and availability and the

interpretation of infant foods advertised as suitable for babies in the age group of four to six months have given rise to extensive criticism by defenders of breastfeeding. These individuals feel that the stipulations of the International Code and the subsequent resolutions should be firmly honoured. It is also frequently quoted the International Code is actually a minimum standard and that the country implementation thereof should be stricter instead of more lenient. The Nutrition Directorate, on the other hand, does not have the capacity to monitor transgressions of the Code and particularly aspects such as the announcement of price and availability of breast-milk substitutes should these become legislated. The status quo with respect to monitoring as introduced in 1986, namely the reporting of transgressions in the field of advertising to the Advertising Standard Authority and transgressions by health workers to the Department, is however still maintained.

With reference to your pertinent question whether the Department is aware of any transgressions by your company, it is agreed that no gross infringements such as statements that breast-milk substitutes are equal or superior to breast milk have not been taken notice of. It is however impossible to judge without reserve due to the fact that particularly vague transgressions of the Code have not been monitored.

In the light of conflict with respect to the interpretation of the stipulations of both the International and South African Codes the revision and updating and possibly also the legislation of the South African Code of Ethics for the Marketing of Breast-milk Substitutes is strongly recommended. In the case of legislation the establishment of an effective legislating body would be of vital importance. Until such time the present Code and the interpretation and monitoring thereof will be retained.

It is hoped that this exposition would satisfy your needs.

Kind regards


DIRECTOR-GENERAL: HEALTH

Date: 590520

CODE COMPLIANCE CERTIFICATE

Nestlé have presented current marketing practices for the breast-milk substitutes they market in (South Africa) to the responsible officials at the Ministry of Health, . . .

MPUMALANGA PROVINCE

The official confirms that the practices presented are in line with the Code of Ethics of the Marketing of Breastmilk Substitutes.

NELSPRUIT

Place

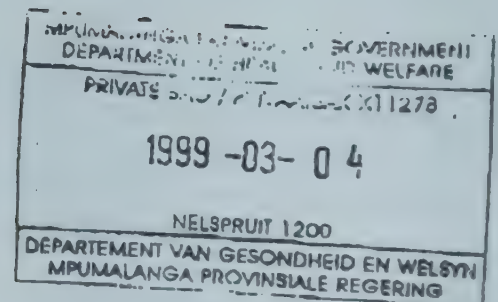
4/3/99

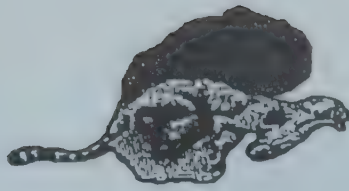
Date

P. R. R. R.

Signature
(Official Stamp)

DEP DIR: NUTRITION





FREE STATE PROVINCIAL GOVERNMENT

Health

The Nutrition Sub Directorate of the Free State Department of Health hereby confirms that, to the best of their knowledge, the representatives from Nestlé conduct themselves in accordance with the Code of Ethics for the marketing of breastmilk substitutes at the public health facilities in the Free State Province.

L.L. Katzen

Deputy Director: Nutrition

Free State Department of Health

06 APR 1999

CODE COMPLIANCE CERTIFICATE

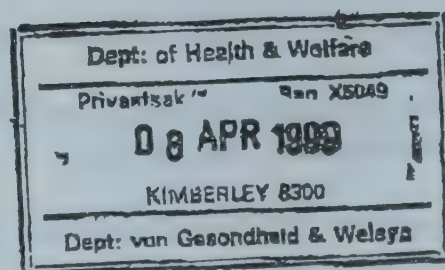
Nestlé have presented current marketing practices for the breast-milk substitutes they market in (South Africa) to the responsible officials at the Ministry of Health, on

The official confirms that the practices presented are in line with the Code of Ethics of the Marketing of Breastmilk Substitutes.

KIMBERLEY =
Place

08 APRIL 1999
Date

A. Magwenkulu DEPUTY DIRECTOR
Signature NUTRITION
(Official Stamp)





MINISTER FOR HEALTH
AFYA HOUSE P.O. BOX 30016 NAIROBI, KENYA

DFH/S&E/3/1/4 VOL 1

24th June 1999

A.R.Murray,
Managing Director,
Nestle Food Company Limited,
P.O.Box 30265,
NAIROBI, KENYA.

Dear Mr Murray

RE: **IMPLEMENTATION OF THE KENYA CODE OF MARKETING
BREASTMILK SUBSTITUTES.**

Thank you for your letter Ref. PNN/cw/2.40 of November 19, 1999.

I am glad to inform you that so far Nestle Foods Kenya Limited, has been following the Code as stipulated in the standards.

Your company has also followed the National Policy on Infant Feeding Practices as best they could.

The Ministry of Health appreciates the consultations that have been held between Mrs P. Ndombi of Nestle and the Chief Nutritionist's Office and I am aware that matters have been sorted out amicably.

I therefore confirm that your Company has been complying with the Kenya Standard Code and the Policy on Infant Feeding Practices. The Code is currently under review and the Ministry is also in the process of developing a policy on HIV/AIDS and Breastfeeding.

We shall gladly share with you the developments as I am sure these are important to your Company.

Yours .

Sincerely
Jackson I. Kalweo

Hon. Jackson I. Kalweo, EGH, MP
Minister for Health.

c.c The Permanent Secretary
 Ministry of Health
 Nairobi.

The Director Of Medical Secretary
Ministry of Health
Nairobi.

CERTIFICAT D'APPLICATION

Le Gouvernement de Madagascar a mis en place les recommandations de l'OMS concernant la commercialisation des substituts du lait maternel par:

- Décret 96-322 datée du 2 mai 1996 et portant comme titre
(Réglementation de la commercialisation des substituts du lait maternel)


Nestlé par lettre du 13 janvier 1999, a présenté sa politique de commercialisation des substituts du lait maternel, au Ministère de la Santé.

Le Ministre de la Santé confirme que la politique de Nestlé, concernant la commercialisation des substituts du lait maternel est en règle avec le Décret 96-322 et portant comme titre (Réglementation de la commercialisation des substituts du lait maternel)

Antananarivo, le 1^{er} MARS 1999

Signature et timbre officiel.

Le Ministre de la Santé



Ratsimbasoa

Professeur RATSIMBASOA HEFA
RAHANTALALAO Henriette

CERTIFICATE OF APPLICATION

The Government of Madagascar has implemented the WHO recommendations concerning the marketing of breast-milk substitutes by:

- Decree 96-322, dated May 2nd 1996 and entitled
(Regulations for Marketing of Breast-milk Substitutes)

Nestlé presented its marketing policy for breast-milk substitutes to the Ministry of Health by letter on January 13th, 1999.

The Minister of Health confirms that Nestlé's policy regarding marketing of breast-milk substitutes conforms to Decree 96-322, entitled (Regulations for Marketing Breast-milk Substitutes)

Antananarivo, March 1 1999

Signature and official stamp.

Minister of Health

Professor RATSIMPA -----HFFA
RAHANTALALAO Henriette



REPÚBLICA DE ANGOLA
MINISTÉRIO DA SAÚDE
Direcção Nacional de Saúde Pública

a) GABINETE DA DIRECTORA

DECLARAÇÃO

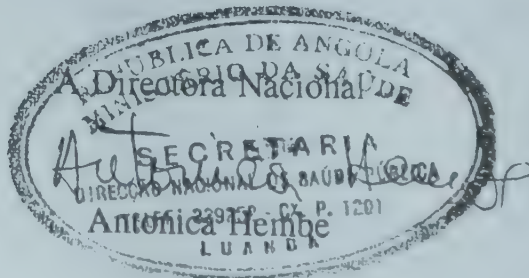
Antonica Francisco Rosário da Costa Hembe, médica do Serviço Nacional de Saúde, e Directora Nacional de Saúde Pública, atesta por sua honra, ter observado a actividade da NESTLÉ em Angola, podendo-se destacar entre outros aspectos o seguinte:

- Através da Direcção Nacional da Saúde Pública (DNSP), a Nestlé apoia e estimula o aleitamento materno exclusivo, como melhor opção para os lactentes durante os primeiros 4 a 6 meses de vida.
- Através da Direcção Nacional de Saúde Pública (DNSP) - Programa de Educação para a Saúde, a Nestlé apoia a preparação de programas educativos para serem difundidos através dos meios de comunicação social, com vista a alertar às mães para as consequências negativas do uso incorrecto das fórmulas infantis.
- Neste momento a Nestlé está a trabalhar com a DNSP, apoiando os esforços tendentes a elaboração do Código Nacional para Comercialização dos Substitutos do Leite Materno, de acordo com as orientações da Organização Mundial de Saúde (OMS).

Neste conformidade, para os efeitos julgados convenientes, vimos através desta dar a nossa permissão a Nestlé, para proceder a comercialização de fórmulas infantis em Angola, para crianças que delas necessitem e cuja orientação provenha de um profissional de saúde devidamente credenciado.

E por ser verdade e me ter sido solicitado, mandei passar esta Declaração que será por mim assinada e autenticada com o carimbo em uso nesta Direcção Nacional.

Gabinete da Directora, em Luanda, aos 30 de Dezembro de 1998



DECLARATION

Antonica Francisco Rosário da Costa Hembe, chief medical officer to the National Health Service and National Director of Public Health, hereby truthfully declares that she has observed the activity deployed by Nestlé in Angola, whereby the following aspects may be pointed out among others:

- Through the National Directorate of Public Health (DNSP), Nestlé promotes and encourages exclusive breastfeeding as the best option for infants aged up to 4 to 6 months.
- Through the National Directorate of Public Health (DNSP) – health education programme – Nestlé helps to draw up educational programmes intended to reach the public through the media, with a view to drawing the attention of mothers to the negative results of incorrect use of infant formulae.
- At the moment, Nestlé is working with DNSP, supporting all efforts towards drawing up a National Code governing the marketing of breast-milk substitutes, in line with the directives issued by the World Health Organisation (WHO).

This being so, and to all intents and purposes, we hereby entitle Nestlé to market infant formulae in Angola, intended for those babies who need them and provided they are prescribed by a properly qualified health worker.

This being true, and having so been requested, the present declaration has been drawn up, and will be signed by me and authenticated with the stamp used in this General Directorate.

Director's office, in Luanda, 30 December 1998

The National Director

Antonica Hembe

Telephone Nos :
263 - 4 - 730011
263 - 4 - 793095

Telegraphic Address:
MEDICUS, Harare

Telex: 22211 MEDICUS ZW



Reference: B/271/27
MINISTRY OF HEALTH
AND CHILD WELFARE
P O Box CY 1122
CAUSEWAY
ZIMBABWE

Fax: 263-4-729154/793634 (702293 FHP)

2 July 1999

Nestle Zimbabwe Ltd
P.O. Box 1668
Harare

Dear Mr Cary

RE: WHO CODE COMPLIANCE

Please find attached a copy of the statement on how the Ministry of Health and Child Welfare views your actions with regard to compliance of the WHO code.

Yours faithfully

A. MANGWIRO

for: SECRETARY FOR HEALTH AND CHILD WELFARE

/spm

25 June, 1999

**Nestle Zimbabwe Compliance to WHO INTERNATIONAL CODE
OF MARKETING OF BREASTMILK SUBSTITUTES between June
1997-June 1999**

The Infant Nutrition Committee met on the 25th June 1999 and reviewed the compliance by Nestle Zimbabwe to the WHO International Code of Marketing of Breastmilk Substitutes. The following reflects the decisions made.

1. *Nestle Infant Formula Marketing*

No violations have been observed to date by the Infant Nutrition Committee members.

2. *Labeling of Infant Formula*

No violations of the WHO International Code have been observed so far. Nestle Zimbabwe is complying with the WHO International Code and the Zimbabwe local Regulations.

3. *Advertisement and Other Promotional Activities for Infant Formula*

None have been observed to date by the INC.

4. *Nestle Scientific Literature*

-The Nest and Annales Nestle are the Scientific publications that have been distributed by Nestle Zimbabwe within the period under review and noted by the INC members.

-Members are to review them as part of the INC activities and forward comments to the Secretariate attention: Mrs. R. Madzima.

5. *The Nestle Charter*

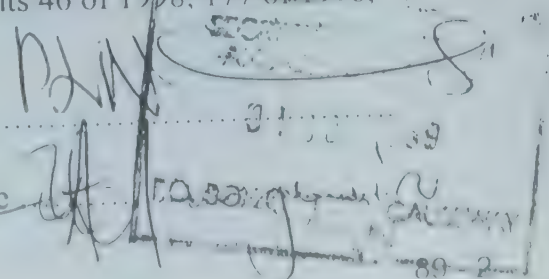
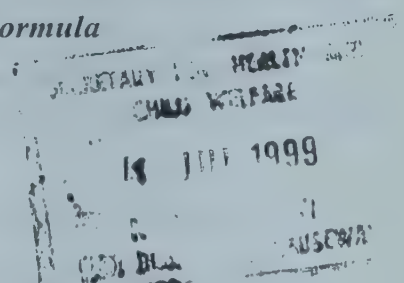
There is need to review the Nestle Charter and addresss the Zimbabwe conditions and give it a Zimbabwe flavour. The words "Nestle Infant Formula Policy in Developing Countries" should be deleted.

Conclusion

The Infant Nutrition Committee agreed that Nestle in Zimbabwe is complying with the WHO International Code OF Marketing of Breastmilk Substitutes. Nestle Zimbabwe is making great efforts to comply with the Zimbabwe Public Health (Breastmilk Substitutes and Infant Nutrition) Regulations 1998: Statutory Instruments 46 of 1998, 177 of 1998, 67 of 1999: CAP: 15: 09.

Signature: Secretary For Health and Child Welfare

Chairman for the Infant Nutrition Committee



REPUBLIQUE RWANDAISE



MINISTRE DE LA SANTE
B.P 84 - KIGALI.

ATTESTATION

Je soussigné, Dr Ezéchias RWABUHIHI, Ministre de la Santé de la République Rwandaise, atteste par la présente que j'ai reçu le rapport annuel du Directeur de la Société NESTLE, Région des Grands Lacs, en ce qui concerne les activités de la Société NESTLE au Rwanda.

Je n'ai pas de remarques spéciales à faire sur le rapport, mais j'encourage la Société NESTLE à continuer dans l'application des instructions du code O.M.S.

Fait à Kigali, le

17 MAI 1999

Le Ministre de la Santé

Dr Ezéchias RWABUHIHI



RWANDA

MINISTRY OF HEALTH

P.O. BOX 84 – KIGALI

TESTIMONIAL

I the undersigned, Dr. Ezéchias RWABUHIHI, Minister of Health of the Rwandan Republic do hereby certify that I have received the annual report from the Manager of NESTLÉ, Great Lakes Region, concerning the NESTLÉ company's activities in Rwanda.

I have no particular comments regarding the report, however I encourage NESTLÉ to continue implementing the instructions of the WHO Code.

Kigali, May 17, 1999

Minister of Health

Dr. Ezéchias RWABUHIHI



MINISTERE DE LA SANTE PUBLIQUE

Cabinet du Ministre

N° 630/NO. 64/46

V/Réf

N/Réf.

Objet

A T T E S T A T I O N .

Je soussigné, Dr Juma Mohamed KARIBURYO, Ministre de la Santé Publique à Bujumbura en République du BURUNDI, atteste par la présente que j'ai reçu le rapport annuel du Directeur de la Société NESTLE - Région des Grands-Lacs, en ce qui concerne les activités de la Société NESTLE au BURUNDI.

J'estime le rapport très satisfaisant et encourage la société NESTLE à continuer dans l'application des instructions du code O.M.S.

Fait à Bujumbura, le 17/5./1999

Dr Juma Mohamed KARIBURYO -



REPUBLIC OF BURUNDI

Bujumbura, 17 May 1999

MINISTRY OF PUBLIC HEALTH

Office of the Minister

CERTIFICATE

I, the undersigned, Dr. Juma Mohamed KARIBURYO, Minister of Public Health in Bujumbura, Republic of Burundi, do hereby certify that I have received the annual report from the Manager of the NESTLÉ Company, Great Lakes Region, concerning NESTLÉ's activities in BURUNDI.

I find the report very satisfactory and encourage the NESTLÉ Company to continue implementing the instructions of the WHO Code.

Issued at Bujumbura, May 17th, 1999

Dr. Juma Mohamed KARIBURYO

CERTIFICAT DE CONFORMITE
AU CODE INTERNATIONAL DE COMMERCIALISATION
DES SUBSTITUTS DU LAIT MATERNEL (OMS)

Le gouvernement de la République Démocratique du Congo applique comme les autres états membres de l'Organisation Mondiale de la Santé le but et les principes du Code International de Commercialisation des substituts du lait maternel (OMS) depuis mai 1981 date d'adoption par l'Assemblée Mondiale de santé.

NESTLE

a fait connaître les pratiques courantes de marketing des substituts du lait maternel qu'elle commercialise aux responsables auprès du Ministère de la santé le 06 mai 1998.

- Le Ministre confirme que les pratiques sont conformes avec le Code International de Commercialisation des substituts du lait maternel (OMS).

ou

- Le Ministre confirme que les pratiques sont conformes avec le Code International de Commercialisation des substituts du lait maternel à l'exception de

(Description de la/ des pratique(s) non conforme(s))

L'action suivante a été menée par NESTLE pour corriger ces pratiques et le Ministre reconnaît à présent que les pratiques de Commercialisation sont conformes au Code International de Commercialisation des substituts du lait maternel.

Détail de l'action corrective entreprise

Lieu KINSHASA

Date 16 JUIN 1999 Signature (cachet officiel)


 LE MINISTRE

Professeur Dr. MASHAKO MAMBA N.L.

CERTIFICATE OF COMPLIANCY
WITH THE INTERNATIONAL CODE OF
MARKETING OF BREAST-MILK SUBSTITUTES (WHO)

The government of the Democratic Republic of the Congo has applied, similarly to the other member states of the World Health Organization, the aim and principles of the International Code of Marketing of Breast-milk Substitutes since its adoption in May 1981 by the World Health Assembly.

NESTLÉ

informed the appropriate responsible persons of the Ministry of Health of their usual marketing practices for marketing breast-milk substitutes on May 6th, 1999.

- The Minister confirms that these practices comply with the International Code of Marketing of Breast-milk Substitutes (WHO).

Place: Kinshasa

Date: 16 June 1999

Signature (official seal)

THE MINISTER

Professor Dr. MASHAKO MAMBA N.L.

REPUBLIQUE FEDERALE ISLAMIQUE
DES COMORES

Moroni, le

22 FEV. 1999

MINISTRE DE LA SANTE PUBLIQUE
ET DE LA POPULATION

LE MINISTRE


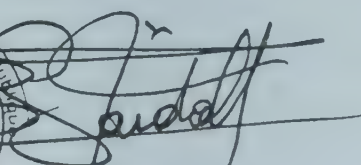
N°99-043/MSPP/CAB

CERTIFICAT D'APPLICATION

Nestlé par lettre du 13 janvier 1999, a présenté sa politique de commercialisation des substituts du lait maternel, au Ministère de la Santé, Publique et de la population de la République Fédérale Islamique des Comores.

Le Ministre de la Santé confirme que la politique de Nestlé, concernant la commercialisation des substituts du lait maternel est en règle avec le code International de l'OMS pour la commercialisation des substituts du lait maternel.

Ce certificat est établi pour servir et valoir ce que de droit.

 
ISSOUFI SAID ALI

FEDERAL ISLAMIC REPUBLIC
OF THE COMORES

Moroni, Feb. 22 1999

MINISTRY OF PUBLIC HEALTH
AND POPULATION

THE MINISTER

No.99-043/MSPP/CAB

CERTIFICATE OF APPLICATION

Nestlé presented its marketing policy for breast-milk substitutes to the Ministry of Public Health and Population of the Federal Islamic Republic of the Comores by letter on January 13th, 1999.

The Minister of Health hereby confirms that Nestlé's policy concerning marketing of breast-milk substitutes complies with the WHO International code of marketing breast-milk substitutes.

This certificate is issued for the use of the entitled party.

ISSOUFI SAID ALI

Le Secrétaire Général

A

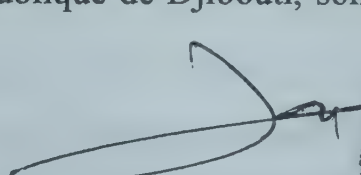
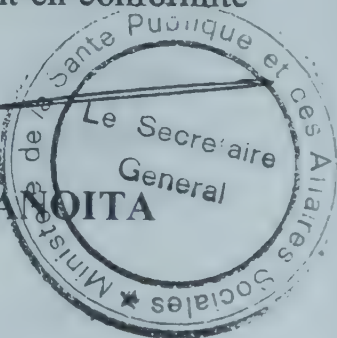
Société NESTLE PRODUCTS EXPORT CORP.
PO Box 19 992
Addis Abeba/ETHIOPIA

**OBJET : Attestation de Conformité aux conditions de
Commercialisation des substituts du Lait Maternel**

Le Gouvernement de la République de Djibouti a mis en œuvre l'objectif et les principes du Code International de Commercialisation des Substituts du Lait Maternel (OMS) à travers :

- Le Décret N°97-0011/PR/PS, fixant les conditions de commercialisation des Substituts du Lait Maternel.

Le Ministère de la Santé confirme par la présente que les pratiques de Nestlé en la matière, sur le territoire de la République de Djibouti, sont en conformité avec la réglementation de Djibouti.


Dr SALEH BANOITA


Copie :

- Mr NAGUIB ABDALLAH Président des Ets NAGUIB
IMPORTERS EXPOTERS REPRESENTATTVES

REPUBLIC OF DJIBOUTI

UNITY-EQUALITY-PEACE

MINISTRY OF PUBLIC HEALTH
AND SOCIAL WELFARE

Djibouti, March 31 1999

The Secretary General

TO
NESTLE PRODUCTS EXPORT CORP.
PO Box 19 992
Addis Abeba/ETHIOPIA

***Regarding: Certificate of Compliancy with conditions for Marketing of
Breast-milk Substitutes***

The Government of the Republic of Djibouti has implemented the aims and principles of the International Code of Marketing of Breast-milk Substitutes (WHO) via:

- Decree #97-0011/PR/PS, establishing the provisions for marketing of Breast-milk Substitutes.

The Ministry of Health confirms by the present communication that, within the territory of the Republic of Djibouti, Nestlé's practices in this regard comply with the Djibouti regulations.

DR. SALEH BANOITA

Copy:

- Mr. NAGUIB ABDALLAH, President Ets. NAGUIB
IMPORTERS EXPORTERS REPRESENTATIVES

OFFICIAL RESPONSE OF GOVERNMENTS

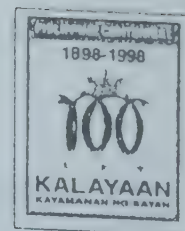
Country Index

1.3 ASIA AND OCEANIA

	Page
• Philippines	101
• Taiwan (China) (<i>with back translation</i>)	102
• Malaysia	104
• Sri Lanka	105
• Australia	106
• Hong Kong SRA (China)	107
• Singapore	108
• New Caledonia (<i>with back translation</i>)	109
• Kiribati	111
• Marshall Islands	112
• Cook Islands	113
• Nauru	115



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY
San Lazaro Compound
Rizal Avenue, Sta. Cruz
Manila, Philippines
Tel. No. 711-95-02, 711-95-03
Fax 743-18-29



February 5, 1999

MR. MICHAEL W.O. GARRETT

Executive Vice-President

NESTLE S.A.

Avenue Nestle 55, CH-1800

Vevey, Switzerland

Dear Mr. Garrett:

This refers to your letter dated 25 January 1999 asking for an assessment on the compliance of Nestle-Philippines on the implementation of the International Code of Marketing of Breastmilk Substitutes (WHO).

For your interest, the Philippines enacted in October 1986, Executive Order 51 also known as the Philippine Code of Marketing of Breastmilk Substitutes, basically patterned after the WHO Code. The Department of Health has vigorously implemented the Code as a policy and has continuously monitored the activities of milk producers to ensure their compliance.

We have been regularly conducting spot checks and investigations in the fields and distribution areas throughout the country. In recent years, there were only few violations reported to this Office. Nestle-Philippines is one of the companies which has consistently cooperated with us in the observance of the Code.

Let us continue this commitment for the welfare of our children.

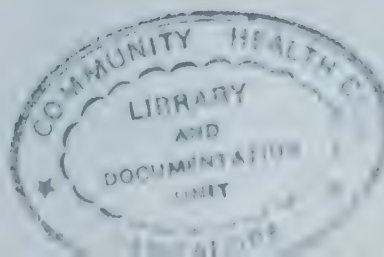
Thank you very much and best regards.

Very truly yours,

ALBERTO G. ROMUALDEZ, JR., MD

Secretary of Health

00021



行政院衛生署 書函

受文者：台灣雀巢股份有限公司

速別：最速件

密等及解密條件：

發文日期：中華民國八十八年四月十九日

發文字號：衛署食字第八八〇二二〇一三號

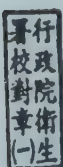
附件：

主旨：貴公司至目前為止，並未有違反「規範嬰兒配方食品及較大嬰兒配方輔助食品行銷活動」規定事項之情事。

說明：復貴公司八十八年三月二十五日未列字號暨八十八年四月十三日（88）雀巢法關字第11868號函。

正本：台灣雀巢股份有限公司

副本：



行政院衛生署

機關地址：台北市中正區100愛國東路一〇〇號
傳真：(02)二三二一〇一五一

(Translation)

**OFFICIAL LETTER FROM DEPARTMENT OF HEALTH,
EXECUTIVE YUAN**

Address: 100 Aikuo E. Road., Taipei

Fax: (02) 2321-0151

To: Nestle Taiwan Ltd.

Level of Importance: Urgent

Issue date: 19 April 1999

Issue No.: HD88022013

Subject:

Up to date, Nestle Taiwan has not had any practices violating the "Guidelines on IMF Marketing".

Explanation:

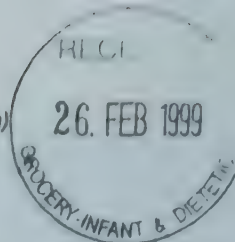
A formal reply letter to Nestle Taiwan's letters dated 25 March 1999 as well as 13 April 1999.

Original copy: Nestle Taiwan Ltd.

Sealed by Department of Health, Executive Yuan



Bahagian Pembangunan Kesihatan Keluarga
(Family Health Development Division)
Jabatan Kesihatan Awam (Public Health Dept.)
Kementerian Kesihatan Malaysia (Ministry of Health Malaysia)
Tingkat 4, Blok E, Komplek Pejabat-Pejabat,
(4th Floor, E Block, Offices Complex)
Jalan Dungun, Damansara Heights
50490 KUALA LUMPUR, MALAYSIA



Tel: 03 - 254
Fax: 03 - 252
Kawat: MINHEALTH, KUALA LUM

Ruj. Tuan:

Ruj. Kami:

Tarikh:

Bil(21) dlmKKM144(192/3)

19 February 1999

Manager
Nestle Products Sdn. Bhd.
P.O. Box 385
Jalan Sultan
46918 Petaling Jaya
(Att.: Mr. Antony Nelson)

Dear Sir,

CODE OF ETHICS FOR INFANT FORMULA PRODUCTS

The Ministry of Health would like to thank you for co-operating with the Ministry in upholding the Code of Ethics for Infant Formula Products. It is hoped that your Industry will further improve in your actions towards promoting, protecting and supporting breast feeding and continue to abide by the Code. It is also our sincere wish that the good rapport that has been established will continue to be strengthened for the sake of the health and well-being of our infants and children in Malaysia.

Thank you.

"BERKHIDMAT UNTUK NEGARA"

Yours sincerely,

(DR. HEMATRAM YADAV)

Director Family Health Development
for Chairman

National Committee on the Code of Ethics for Infant Formula Products
Ministry of Health Malaysia

Zai/c:suratindustri/180299

Telephone } 698475
698490
698507

} 692913
 } 698520



සුවසිරිපාය
சுவசிரிபாய
Suwasiripaya

}
 }
My No. }

}
 }
Our No. }

}
 }
Date } 22.02.99

සෞඛ්‍ය හා දේශීය වෛද්‍ය අමාත්‍යාංශය
சுகாதார சாதேச வைத்தியத்துறை அமைச்சு
MINISTRY OF HEALTH AND INDIGENOUS MEDICINE

TO WHOM IT MAY CONCERN

This is to certify that Nestle Lanka Ltd has conformed to the Sri Lanka code for the promotion of Breast Feeding & marketing of the Breast Milk substitutes and related products as well as the WHO International Code of marketing of Breast Milk substitutes in marketing their infant formulae & infant cereals.

Dr. Reggie Perera
Addl. Secretary/Health (MS)

Our Reference: C98/09553

Mr PJ Kelly
General Manager - Corporate Services
Nestlé Australia Ltd
PO Box 4320
SYDNEY NSW 2001

Dear Mr Kelly

Nestlé Australia's compliance with the MAIF Agreement

Thank you for your letter of 24 November 1998 concerning your request for written verification of Nestlé Australia's compliance with the Marketing in Australia of Infant Formulas: Manufacturers and Importers Agreement (the MAIF Agreement).

I can confirm that the Panel has not found any breaches of the MAIF Agreement against Nestlé Australia since the Agreement's inception in 1992.

I hope this advice is sufficient for your review. If you have any further queries, please contact the Secretariat on ph: 02 6213 6147. Thank you for your on-going cooperation with the Panel.

Yours sincerely



Dr Christine Bennett
Chairman

9 December 1998

衛生署
家庭健康服務部
香港灣仔皇后大道東213號
胡忠大廈十八樓



FAMILY HEALTH SERVICE
DEPARTMENT OF HEALTH
18th Floor, Wu Chung House,
213 Queen's Road East, Wan Chai,
HONG KONG.

署編號 OUR REF: (12) in Med 31/1 Pt.3
函編號 YOUR REF:
話 TEL: 2961 8856
文傳真 FAX: 2574 8977

19th May 1999

Mr. Ernst Portmann
General Manager
Nestle Hong Kong Ltd.
28/F, HongkongTelcom Tower
Taikoo Place
979 King's Road
Quarry Bay
Hong Kong

Dear Mr. Portmann,

Re: WHO Code of Marketing of Breast-milk Substitutes

I am impressed by Nestle's efforts in ensuring its activities to comply with the WHO International Code of Marketing of Breast Milk Substitutes in Hong Kong. To the best of my knowledge, mothers are not being solicited by Nestle's representatives to use infant milk formula with free sampling in all of our maternal and child health centres and maternity homes.

Yours sincerely,

(Dr. Helen K.Y. YAU)
Principal Medical Officer
(Family Health Service)
Department of Health

HKYY/lc



Our Ref: MH (CF) 24:01/7

15 Jan 98

DID: 321 4597

Mr Dennis Khoo
The Corporate Affairs Manager and
Director of Communications
Nestlé Singapore (Pte) Ltd

Dear Mr Khoo

NATIONAL CODE COMPLIANCE

The Sale of Infant Foods Ethics Committee, Singapore (SIFECS) was established in 1979 and Nestlé Singapore is one of the Infant Industry Representatives under the SIFECS Members list.

I am pleased to confirm that Nestlé Singapore does comply and conform with the marketing practices as stated in the SIFECS Code.

Yours sincerely

DR HO LAI YUN
CHAIRMAN
SIFECS

Cyy/d8/sifecs2





Direction Provinciale des Affaires
Sanitaires et Sociales

N° 6070 /YR/LP/ 924 / DPASS-Nord

B.P. 41
98860 - KONÉ

Tél : 47.72.30
Fax : 47.71.92

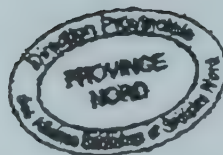
KONE, le **30 MARS 1999**

Le Médecin Coordonnateur
à

SOCIETE NESTLE
NOUMEA

Nous attestons que nous entretenons d'excellentes relations avec la Société NESTLE et nous tenons à souligner que la Société NESTLE a suivi parfaitement les normes du code de commercialisation des substituts de lait maternel.

La société NESTLE a toujours respecté les lois gouvernant l'alimentation des enfants dans notre pays et a toujours encouragé le principe que l'allaitement au sein est le meilleur aliment du nourrisson.



Le Médecin Coordonnateur

Thierry MRELOT

NEW CALEDONIA
NORTHERN PROVINCE

PO Box 41
98860 KONÉ

Provincial Administration for
Health and Social Welfare

KONÉ March 30 1999

Co-ordinating Physician
to

NESTLE COMPANY
NOUMEA

We hereby declare that we maintain excellent relations with the NESTLE Company, and affirm that NESTLE has complied fully with the norms of the Code of Marketing of Breast-milk Substitutes.

NESTLÉ has always respected the laws governing child nutrition in our country, and has always encouraged the principle that breast-feeding is the best nutrition for infants.

Co-ordinating Physician

Thierry MEILLOT

March 26, 1999

• Page 2



TEL: 686 28100
FAX: 686 28152

MINISTRY OF HEALTH

P. O. Box 260,
Bikenibeu,
Tarawa,
REPUBLIC OF KIRIBATI.



TELEGRAM: MEDHEK
EMAIL: mhp @ gov. ki

In reply please quote:

22nd March 99

To: Head Office
Lot 1, Wailekutu Industrial
Sub-Division
Box 3042
Lami, Fiji
Fax No. (679) 361 166

Attention: Samuelia Savou

Re: NESTLE CODE COMPLIANCE

Dear Mr. Savou .

Thank you for complying with the code. As you are aware it is for the health and welfare of all children.

Kiribati don't have a national code yet but we are following the International Code of Marketing (WHO)

However we have guidelines on Breastfeeding for Health Workers which you have and which also indicates that Breastmilk substitutes are discouraged at all cost by the Ministry of Health. The main reasons are:

1. Breastfeeding is the best food for a child (every mother is capable of providing when managed well)
2. It has been proven that children have often fallen sick due to poor hygiene during the preparation.

As strong advocates of breastfeeding we will surely inform you of any violation that your company has against the Kiribati Policy and as well as the international code of marketing

If you need a contact person for your products it is best that you contact the Ministry of Trade or Commerce. Thank You

Sincerely

Tinai Iuta Metai

Nutritionist

For Secretary NHFP



MINISTRY OF HEALTH AND ENVIRONMENT

P.O. BOX 16

REPUBLIC OF THE MARSHALL ISLANDS

MAJURO, MARSHALL ISLANDS 96960

Phone: 011-682-625-3355/3399 • Fax: 011-682-625-3432

April 29, 1999

To : Mr. Sammela Savon
Nestle Trading (Fiji) Ltd. Fax: 679-361-166

From : Julia M. Alfred
Coordinator, Nutrition Unit

Subject : NESTLE WHO CODE COMPLIANCE

Dear Mr. Savon,

This is in response to your letter dated 27 April, 1999. I would like to share with you what our Hospital Policy states in regards to Breastmilk Substitutes.

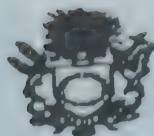
Infant Feeding Supplies, Samples and Publicity

1. All bottles, teats, soothers, pacifiers, subsidized supplies of breastmilk substitutes and formulas are banned from the OB/Maternity wards. Such supplies and the offer to use these samples may not be accepted by the Ministry of Health & Environment and health workers at all levels. Should one be required for medical reasons, there should be written instructions from the attending physician.
2. All promotional materials for formula/bottle feeding (posters, leaflets, free samples, video tapes) are banned from the hospitals and all health care facilities in the Republic.
3. Sponsorship or awards from companies and institutions selling breastmilk substitutes should be refused.

The Code includes important provisions in regards to promotion and advertising of breastmilk substitutes and Nestle does comply with those provisions as far as Majuro Hospital is concerned.

I hope the additional information is helpful.
Kind regards.

cc: Justina R. Langidrik, Asst. Secretary, PHC



MINISTRY OF HEALTH

Mailing Address: PO Box 105
Suva
Suva
COOK ISLANDS

Phone: (642) 29444
Fax: (642) 23109

Email: msmaki@ovsnet.net.fj

February 5, 1999

Samuela Savou
Business Development Manager
Nestle Trading (Fiji) Ltd
Box 3042
Lami
FIJI

Dear Samuela Savou

re: Nestle "WHO CODE" Compliance

Thank you for your letter dated 11 January 1999 with regards to above subject.


I have discussed this matter with our Nutritionist and she has provided me the following informations.

1. We do not have our own legislation regarding the Marketing of Breastmilk Substitutes therefore at present we follow the International Code as set by WHO.
2. At present, I have not noticed any of their products being sold here. Those identified are Wyeth, Heinz, Watties and another NZ Company that markets karitane and goatmilk formulas.
3. The Ministry of Health has initiated the WHO/UNICEF Baby Friendly Hospital Initiative and therefore has implemented the 10 steps, one of which is a breastfeeding policy which:
 - Does not allow the supply of free samples of infant formulas or infant foods and bottles to staff or mothers from Manufacturers or distributors;

- Does not allow the display of posters or pictures from infant formula/food companies.

Therefore, your company as far as we are aware does comply with the code in the Cook Islands.

Yours sincerely


Dr. Teariki Tamarua
SECRETARY OF HEALTH



Secretary for Health & Medical Services
Department of Health
Republic of Nauru

TEL (674) 4443702 FAX (674) 4443106

1ST APRIL 1999

Mr Sean Oppenheimer
Capelle & Partner
Pacific & Occidental Co.
REPUBLIC OF NAURU

Fax: (674) 444 3759

FAXED
1/4/99
1044 210.

Dear Sir,

SUBJECT: NESTLE WHO CODE COMPLIANCE

Your letter to the Honourable Minister for Health dated 29 March 1999 on the above subject was brought to my attention for the needful.

In this regard, therefore, please be advised that the Health Authority on Nauru does not object to your company importing and selling Nestle's Infant Formula products as:

NAN 1 in 450g and 1 Kilo tins;
NAN 2 in 450g and 1 Kilo tin, and;
LACTOGEN in 450g and 1 Kilo tins.

The Health Authority also understands that the Nestle's Infant Formula products are in accordance with the WHO Code compliance.

Kind Regards,

Dr. Mark D. Kun
DR. MARK D. KUN
SECRETARY FOR HEALTH & MEDICAL SERVICES/
ACTING DIRECTOR OF PUBLIC HEALTH

cc: Minister for Health - For Kind Information

: Samuela Savou (Nestle Trading (Fiji) Ltd 679 361166 ..

OFFICIAL RESPONSE OF GOVERNMENTS

Country Index

1.4 MIDDLE EAST

	Page
• Jordan (<i>with back translation</i>)	117
• Lebanon (<i>with back translation</i>)	119
• Palestine (<i>with back translation</i>)	121
• Oman	123
• United Arab Emirates (<i>with back translation</i>)	124
• Kuwait (<i>with back translation</i>)	126
• Cyprus	128
• Bahrain	129
• Qatar (<i>with back translation</i>)	130

وزارة الصحة



مديرية صحة

المركز

الموافق ١٤ / ٢ / ١٩٩٩

التاريخ / / ١٤

الرقم : قط / ١٧٥

امـن يهـمـه الأـمـر

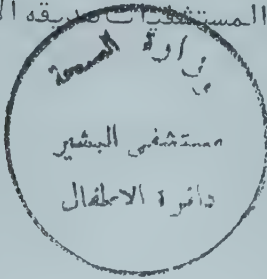
=====

بعد المراقبـه والمتابعه نشهد ان شركه نستله المنتجه لحليب وأغذيـه
الاطفال الرضع تتقيد ببنود التعليمات المحليه لتسويق بدائل حليب الأم وأغذيـه
الاطفال والتي تتماشى مع نصوص المدونه الدوليه لتسويق بدائل حليب الأم .

٢
الدكتور سمير الفاعوري

رئيس دائره الاطفال

منسق برنامج المستشفيات صديقـه الاطفال .



(TRANSLATION FROM ARABIC)

THE HASHEMITE KINGDOM OF JORDAN

MINISTRY OF HEALTH

HEALTH DIRECTORATE OF: -----

HEALTH CENTER OF: -----

Ref. : Q.T./175

Date: 14.02.1999

TO WHOM IT MAY CONCERN

We hereby certify, after control and follow-up, that *Nestle Co.* - the producer of infant formulae and baby foods - is strictly committed to the local regulations for marketing of breast milk substitutes and baby foods which are consistent with the International Code for marketing breast milk substitutes.

Dr. Samir Al-Fa'ouri

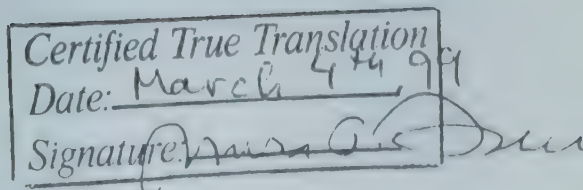
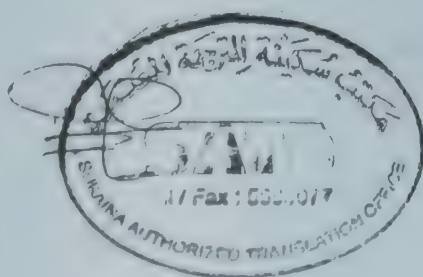
Head of Baby Dept.

Coordinator of Baby Friendly

Hospitals Programme

(Signed)

(Stamp of Baby Dept./ Al-Bashir Hospital)





وزارة الصحة العامة

الجمهورية اللبنانية

الوزير

REF:148 /99/GH/KK

رقم الصادر:

بيروت في : ١٥/٤/١٩٩٩

جانب شركة نستله الموقرة

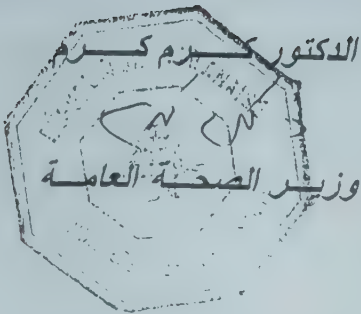
تحية طيبة وبعد،

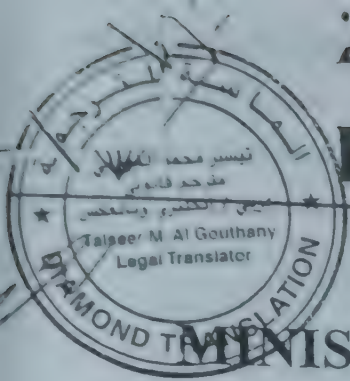
أطلعنا على كتابكم المؤرخ في ٣ شباط ١٩٩٩ وكذلك المستندات المرفقة به.

نفيدكم بأنه حتى تاريخه لم ترفع إلينا شكاوى أو مراجعات حول التزامكم بتنفيذ المدونة

الدولية لتسويق بدائل حليب الأم والممارسات التي تقومون بها ضمن هذا النطاق في لبنان.

وتفضلوا بقبول الاحترام





المهارة للترجمة القانونية DIAMOND LEGAL TRANSLATION

MINISTRY OF PUBLIC HEALTH REPUBLIC OF LEBANON THE MINISTER

Ref: 148/99/GH/KK

Beirut, 15/4/1999

To : Nestle Lebanon

Dear Sirs,

We have received your letter of February 3, 1999, together with the enclosed documents.

We inform you that until to date we did not receive any complaints regarding your compliance and implementation of the “**International Code of Marketing of Breastmilk Substitutes**”, as well as your marketing practices in this regard in Lebanon.

Dr. Karam Karam
Minister of Health





التاريخ: 99/4/11

الرقم: ص ط/التغذية

حفظه الله

السيد / باسم صلاح صالح
مندوب شركة نستله - غزة

بعد التحية ,,,

إيماءاً الى تأشيرة معالي الدكتور وزير الصحة على كتابكم بتاريخ 1999/2/14 وكذلك زيارتكم لي في ادارة صحة الطفل بخصوص نشاطات شركة نستله حول موضوع تغذية الرضع وصغار الاطفال ،فأنتى دوماً أرحب بالزيارات التنسيقية مع جميع من يعمل في هذا الحقل الهام و أنا فى انتظار استمرار تنسيقكم فى المستقبل معنا لما فيه مصلحة الاطفال فى فلسطين .
و أما بالنسبة لمدى التزامكم بالمدونة الدولية لتسويق بدائل حليب الام فانه و بعد زيارات متكررة لمؤسساتنا الصحية الوزارية والتي تعنى بالاطفال الرضع ، قد تبين لى ان مندوبى شركة نستله يطبقون توصيات تلك المدونة بشكل جيد وهو مؤشر ايجابى نحو/التزام بتشجيع الرضاعة الطبيعية ودعمها .

آمله فى استمرار جهودكم الطبية فى مجال تغذية الرضع وصغار الاطفال .

واقبلوا التحية ,,,

د. رغدا الشوا
مدير عام صحة الطفل

دكتوراه رغدا الشوا
Dr. Bughda Shawwa
ترخيص ١٠ - ١٩٧٦

مرفق طيه :

*صورة لمعالي وزير الصحة .

*صورة لملف التغذية .

المأسسة للترجمة القانونية
DIAMOND LEGAL TRANSLATION

Palestinian National Authority
Ministry OF Health
Child Health Directorate

Date 11/4/99

Date 11/4/99

Mr .B . Saleh
Nestle Representative

Dear Sir ,

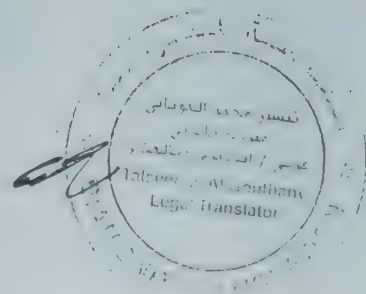
Reference to the approval of his excellency the minister of health to your letter dated 14/2/99 , and your subsequent visit to me in the Child Health Directorate offices and the discussion we had on Nestle activities with regard to infant and child feeding .

I always welcome such visits with all parties working in this important domain, and I expect we continue our cooperation in the future aiming at best interest of infants in Palestine.

As your compliance with the “ **Intentional Code Of Marketing Of Breast- Milk Substitutes**” and after our repeated visits to the governmental health institutions which care of infants, I found out that Nestle representatives fully implement the recommendations of above-mentioned code. This is a positive sign towards the commitment of encouraging and supporting breast-feeding.

Hoping that you will continue with your efforts in this regard.

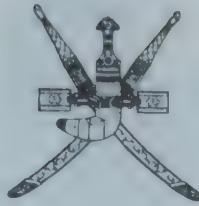
Dr. Raghda Al-shawa
Director – child Care



SULTANATE OF OMAN

MINISTRY OF HEALTH

DIRECTORATE GENERAL OF ROYAL HOSPITAL



سلطنة عمان
وزارة الصحة
المديرية العامة للمستشفى السلطاني

Ref :

Date :

DIVISION OF CHILD HEALTH

الرقم :

التاريخ :

الموافق :

Our Ref:RH/DCH/SAK/DG
8th March, 1999

Mr.Mohammed Hassan
Nestle Medical Delegate
Matrah Cold Stores
P O Box 1158, P.C.112
MUSCAT

Dear Mohammed,

This is to express our sincere gratitude and thanks for your co-operation in attending the meeting on the Omani Code for BMS at the Ministry of Health on Sunday, 22nd November, 1998 on behalf of Nestle.

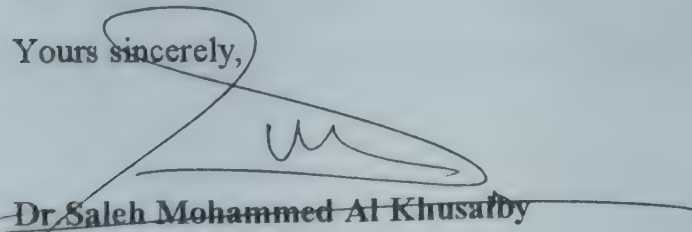
We are happy to know that you all have the same goals in improving the health of mothers and children in Oman.

We highly appreciate your co-operation and we hope that your Company will continue to give us support and commitment and to abide by the policies as laid down by the Ministry of Health.

We hope to be able to keep communication with you and if there are any doubts please do not hesitate to contact us and we will give you time to meet with you all.

Best wishes.

Yours sincerely,


Dr. Saleh Mohammed Al Khusafy
Head, Child Health

Telephone Number: 591751
599410

DR. SALEH BIN MOHAMED AL KHUSAFY
SEN. CONSULTANT PAEDIATRICIAN
HEAD, CHILD HEALTH



١٣/٣/١٩٩٩م

(شهادة لمن يهمه الأمر)

تشهد منطقة رأس الخيمة الطبية أن (شركة نستله) تقوم بتطبيق أهداف ومبادئ المدونة الدولية لتسويق بدائل لبن الأم الصادرة من قبل منظمة الصحة العالمية ، هذا كما أن جميع مطبوعاتها تؤكد أولوية وأهمية الرضاعة الطبيعية .
نرجو أن تستمر (شركة نستله) في أدائها الذي يرقى إلى مستوى المسؤولية فيما فيه من نفع لصحة الطفل والمجتمع .

د. ياسر عيسى حمد النعيمي

استشاري طب الأطفال

مدير منطقة رأس الخيمة الطبية





المأسسة للترجمة القانونية DIAMOND LEGAL TRANSLATION

United Arab Emirates

Ministry of health

Ras Al Khaimah Medical District

Saqr Hospital

13/3/1999

TO WHOM IT MAY CONCERN

Ras Al Khaimah Medical District certifies that Nestlé complies with the principles and aim of the "International Code of Marketing of Breastmilk substitutes" issued by the World Health Organization.

We hope that Nestlé continues to assume its full responsibility in this regard, as this leads to the benefit of infant and community health

Signed by

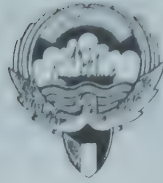
Dr. Yaser Essa Hamad Al Nuwami

Pediatric Consultant

Director of Ras Al Khaimah Medical District

Stamp of Ministry of Health - Ras Al Khaimah District - U.A.E





المرجع : ج.ب. ١٠٥ / ٩٩١
التاريخ : ٩٩١.٤.١٨

شهادة لمن يهمه الأمر

تشهد وحدة التغذية بوزارة الصحة بدولة الكويت أن (شركة نستله) تقوم بتطبيق أهداف ومبادئ المدونة الدولية لتسويق بدائل لبن الأم الصادره من قبل منظمة الصحة العالمية .

هذا ونرجو أن تستمر (شركة نستله) في أدائها الذي يرتقى الى مستوى المسئوليه فيما فيه من نفع لصحة الطفل والمجتمع .

رئيسة وحدة تغذية المجتمع

د. كنزة زهر المومس

رئيسة وحدة تغذية المجتمع

ن ر

State of Kuwait
Ministry of Health
Drug & Food Control

Nutrition Unit

Reference: OT/105/99

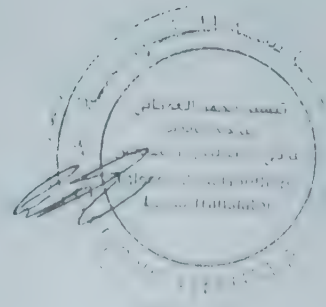
Date: 08/02/99

TO WHOM IT MAY CONERN

The Nutrition unit at the Ministry of Health in the State of Kuwait Certifies that the Marketing practices of Nestlé Kuwait complies with the principles and aim of the "International code of Marketing of Breastmilk substitutes" issued by the World Health Organization.

We hope that Nestlé continues to assume its full responsibility in this regard, as this leads to the benefit of infant and community health.

Signed by
Dr. Zamzam Al-Mousa
Head-Community Nutrition Unit





MINISTRY OF HEALTH
MEDICAL AND PUBLIC HEALTH
SERVICES
1449 NICOSIA-CYPRUS

29th March , 1999

TO WHOM IT MAY CONCERN

W.H.O. International Code of Marketing of
Breast-milk substitutes

Having seen the instructions issued by Nestle to all their agents and distributors for the implementation of the above " Code" , we hereby certify that in Cyprus we have not verified any violation of the aims and principles of the said "code " by the Nestle agents distributors, Messrs Vassos Eliades Ltd.

for Director
Medical and Public
Health Services

GS/tv



No. NH/ PC/ AJ/73 /98

الرقم :

Date 30/12/1998

التاريخ :

To: Nestle/ Middle East/ Free Zone Dubai/ UA E

We would like to thank and appreciate Nestle and medical delegate for their compliance of WHO code and the Bahraini National code regarding marketing activities on Breast milk substitutes. The stress and focus on the superiority of human milk and the importance of breast feeding to the well being of infants is evident in Nestle print materials and literatures. We found Nestle is the only company when it comes to implementation of WHO code and Bahrain national code.

So many thanks to NESTLE for their support.

Dr. Nada Haffadh
Chairperson of Breast Feeding Committee
& Baby Friendly Hospital Program
Ministry of Health/ Bahrain



أمر : ٩٩/١٢ ط. ص

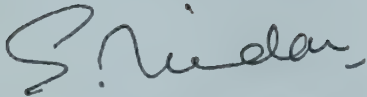
تاريخ : ١٩٩٩/٢/٢٠

Ref. :

Date :

شهادة لمن يهمه الأمر

تشهد إدارة الرعاية الصحية الأولية بدولة قطر أن شركة نستله تقوم بتطبيق أهداف ومبادئ المدونة الدولية لتسويق بدائل لبن الأم الصادرة من قبل منظمة الصحة العالمية ، هذا كما أن جميع مطبوعاتها تؤكد أولوية وأهمية الرضاعة الطبيعية .
نرجو أن تستمر (شركة نستله) في أدائها الذي يرقى إلى مستوى المسؤولية فيما فيه من نفع لصحة الطفل والمجتمع .



الدكتور / صفوان زيدان

مدير شئون الأطباء



المأسسة للترجمة القانونية DIAMOND LEGAL TRANSLATION

Ministry of Public Health

STATE OF QATAR

Reference: S.T12/99

Date: 02/03/1999

TO WHOM IT MAY CONCERN

The administration of Primary Health Care in Qatar Certifies that Nestlé complies with the principles and aim of the "International code of marketing of breastmilk substitutes" issued by the World Health Organization. Moreover, all Nestlé printed material emphasize the superiority and importance of breastfeeding.

We hope that Nestlé continues to assume its full responsibility in this regard, as this leads to the benefit of infant and community health.

Signed By

Dr. Safwan Zaidan

Director of Medical Staff



OFFICIAL RESPONSE OF GOVERNMENTS

Country Index

1.5 EUROPE

	Page
• Russia (<i>with back translation</i>)	133
• Germany (<i>English translation only</i>)	135
• Romania (<i>with back translation</i>)	150
• Portugal (<i>with back translation</i>)	152
• Bulgaria (<i>with back translation</i>)	154
• Switzerland (<i>with back translation</i>)	156
• Denmark (<i>with back translation</i>)	176
• Finland	178
• Norway (<i>with back translation</i>)	179



МИНИСТЕРСТВО
СЕЛЬСКОГО ХОЗЯЙСТВА
И ПРОДОВОЛЬСТВИЯ
РОССИЙСКОЙ ФЕДЕРАЦИИ
(Минсельхозпрод России)

107139, Москва, Орликов пер., 1/11.
Для телеграмм: Москва, 84
Минроссельхозпрод.
Телекс: 411258 ЗЕРНО
Факс: (095) 207-83-62. Тел.: 207-80-00

Руководителю отдела детского
Питания Компании Нестле
Фуд ООО

Госпоже Е. В. Котляровой

06.04.99 № 11-26/405

На № _____

[_____]

Глубокоуважаемая госпожа Котлярова!

Сообщаем Вам, что в настоящее время Министерство сельского хозяйства и продовольствия Российской Федерации не имеет сведений о нарушениях Европейской Директивы по правилам торговли заменителями грудного молока компанией Нестле Фуд ООО.

Любая информация о нарушении этих правил будет немедленно доведена до сведения Вашей компании.

Заместитель руководителя
Департамента пищевой,
перерабатывающей промышленности
и детского питания

Е. А. Красильникова

From: Ministry of Agriculture and Food Stuffs of the Russian Federation

To: Nestle Food LLC

Attn.: Mrs. E.V. Kotlyarova, business manager of Infant Food Department

Ref. No. 11-26/405 from April 06, 1999

Dear Mrs. Kotlyarova,

We would like to inform you that no case of Nestle Food LLC's non-complying with the EEC Directive for the marketing of breast-milk substitutes has been so far reported to the Ministry of Agriculture and Food Stuffs of the Russian Federation.

Any information about violations of these regulations will be immediately made known to your company's management.

Yours truly,

E.A. Krasilnikova,
Deputy Head of Department
of food manufacturing industry and infant food

Q DG-R

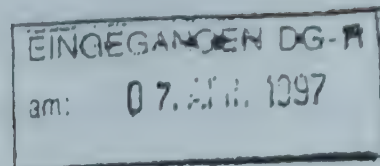
Bundesrat (Federal Council)

Circular 98/97

February 5, 1997

Notification

by the Federal Government



Report by the Federal Government on Experiences in Connection with the German Law on Advertising for Infant Formulae and Follow-on Formulae ("Säuglingsnahrungswerbegesetz" – SNWG)

Federal Ministry for Health

Bonn, February 4, 1997

411

Minister-President Erwin Teufel,
President of the German Bundesrat

Dear Minister-President Teufel

Please find enclosed the Federal Government's report on experiences in connection with the German Law on Advertising for Infant Formulae and Follow-on Formulae.

Yours sincerely

ppa.

(signed)

Baldur Wagner

Report by the Federal Government on Experiences in Connection with the German Law on Advertising for Infant Formulae and Follow-on Formulae ("Säuglingsnahrungswerbegesetz" – SNWG)

I. Introduction

In its 237th session of June 29, 1994, the German Bundestag approved a Bill on Advertising for Infant Formulae and Follow-on Formulae ("Säuglingsnahrungswerbegesetz" – SNWG, German Infant Formula Advertising Law) and adopted a motion for a resolution passed by the Health Committee on June 23, 1994 (Circular 12/8146).

Amongst other things, said resolution calls upon the Federal Government

"to draw up and present a report covering experiences made in connection with the Infant Formula Advertising Law in the two-year period following the coming into effect of said law. In so doing, the Federal Government should also examine the possibility of setting up an advisory council responsible for appraising adverting messages."

Following approval by the Bundesrat, the Infant Formula Advertising Law was promulgated in the Federal Law Gazette on October 13, 1994 (BGBl. I S. 2838 et seq.) and went into effect on the following day.

This report has been drawn up by the Federal Government in compliance with the resolution adopted by the German Bundestag when approving the law in question.

II. Purpose and objectives of the Infant Formula Advertising Law

First, the Infant Formula Advertising Law serves the purpose of transposing into German law the mandatory provisions re the harmonisation of legislation in the individual Member States contained in Commission Directive 91/321/EEC of 14 May 1991 on infant formulae and follow-on formulae. Like the above-mentioned Commission Directive, the German law pursues the goal of creating the necessary prerequisites for the protection and promotion of breastfeeding through certain prohibitions and restrictions with respect to advertising for infant formulae and follow-on formulae, through provisions concerning information about the properties and proper use of such products, and through provisions on the provision of information with respect to the advantages of breastfeeding.

Both the Commission Directive and the Infant Formula Advertising Law are thus in compliance with the objectives and principles laid down in the International Code for the Marketing of Breast-Milk Substitutes adopted by the 34th World Health Assembly in 1981 and take into account the legal and factual preconditions prevailing in the European Community, as outlined in the reasons on which said directive is based.

II. Legal situation

1. Infant Formula Advertising Law (SNWG)

With the Infant Formula Advertising Law, those parts of Commission Directive 91/321/EEG of 14 May 1991 on infant formulae and follow-on formulae that contain mandatory provisions on the harmonisation of legislation in the individual Member States with respect to advertising for the above-mentioned products, the necessary education of mothers in the advantages of breastfeeding and the dangers and disadvantages of using breast-milk substitutes were transposed into national law. The adoption of a law was required because the necessary authorisations for implementing the provisions of the directive relating to advertising and education in the form of an ordinance did not exist. The provisions were not incorporated into the existing German Law on Food and Articles of Daily Use, since the purpose and content of the new provisions were not compatible with the framework of that law. The overarching objectives of the directive, i.e. protection and promotion of breastfeeding, were the motive for adoption of a separate law. The other provisions of the directive, which refer to the properties, in particular the composition, and the labelling of infant formulae and follow-on formulae, were integrated in the German "Diät-Verordnung" (Dietetic Ordinance) by virtue of the 8th Ordinance on the Amendment of the Dietetic Ordinance of November 21, 1996 (BGBl. I S. 1812).

Specifically, the Infant Formula Advertising Law contains the following new provisions re restrictions on advertising for infant formulae and follow-on formulae:

Section 3 (1) SNWG imposes prohibitions restricting advertising for both infant formulae and follow-on formulae. Amongst other things, advertising that fails to include the necessary information on the proper use of the products and advertising aimed at preventing mothers from breastfeeding is prohibited. Advertising containing terms such as "humanised" or "maternalised" or "adapted" is prohibited, too, unless the product in question complies with the requirements re protein content stipulated in the Exhibit thereto.

In addition to the above-mentioned prohibitions, Section 3 (2) SNWG imposes further restrictions on advertising for infant formulae. Amongst other things, advertising for infant formulae must not contain any advertising messages that differ from those described in the Exhibit thereto. Companies are permitted to use correct, factual information for which sufficient scientific proof exists. This possibility was included in the law on the recommendation of the Health Committee of the German Bundestag

with a view to permitting the furnishing of information to consumers about the proper and appropriate use of the products and description of innovations. In addition, the Infant Formula Advertising Law limits advertising for infant formulae to scientific publications and publications devoted to child care. In addition, the use of children's pictures or other pictures, with the exception of drawings that facilitate identification of the product or illustrate the preparation of the formula, is not permitted in advertising for infant formulae. Advertising providing direct or indirect purchase incentives for final consumers in the form of distribution of free or reduced-cost products or other additional purchase incentives by institutions or persons involved in health care is prohibited, too.

The law also provides provisions on the restriction of certain forms of indirect advertising. For example, Section 4 (1) SNWG stipulates that written and audio-visual information and education material on infant nutrition to be handed out to pregnant women and mothers of infants and toddlers and containing indirect advertising for infant formulae and follow-on formulae may be distributed only if it clearly elucidates, amongst other things, the advantages and benefits of breastfeeding, maternal diet requirements and preparatory steps necessary for successful breastfeeding, as well as any negative consequences additional bottle feeding may have on breastfeeding. In addition, such material must underline how difficult it is to undo the decision against breastfeeding.

Written or audio-visual material that contains information on the use of infant formulae must also provide information on the social and financial implications of such use, i.e. indicate the costs of breast-milk substitutes and the health risks involved in the use of products that are not suited as starter formulae or the improper use of such products.

Pursuant to Section 4 (4) SNWG, manufacturers and retailers of infant formulae and follow-on formulae are, in principle, not permitted to distribute giveaways for informational and educational purposes, including baby scales, bottle warmers etc., that serve as indirect advertising media for infant formulae or follow-on formulae. This prohibition does not apply to the distribution of such items via health-care institutions. Further requirements re the distribution of such articles are laid down in the law of the individual German *Länder*.

Pursuant to Section 5 SNWG, the responsibility for monitoring compliance with the law is governed by *Länder* law. The general provisions of the German Law on Food and Articles of Daily Use shall hereby apply *mutatis mutandis*.

Section 6 SNWG provides for the necessary sanctions in the event of infringements of the orders and prohibitions of the Infant Formula Advertising Law. Pursuant to this section, fines of up to DM 50,000 can be imposed in the event of breaches of the law, such breaches being treated as administrative offences.

Pursuant to Section 7 SNWG, the law went into effect on October 14, 1994. According to the transitional provisions of the law, it was still permitted until May 1, 1995 to use advertising material for infant formulae and follow-on formulae within the meaning of Section 3 and material and articles for informational and educational purposes within the meaning of Section 4 that had been produced prior to that date and in compliance with the previously valid law.

2. Länder law pursuant to Section 4 (4), s. 4 SNWG

So far, no *Land* has passed legislation stipulating further requirements within the meaning of Sec. 4 (4) s. 4 SNWG re the distribution of articles for informational and educational purposes that also serve as indirect advertising media for infant formulae and follow-on formulae. A number of *Länder* are considering the preparation of legislation to this effect.

In its 67th session on November 17/18, 1994, the "Gesundheitsministerkonferenz" (GMK, Conference of German Health Ministers) passed a resolution commissioning the "Arbeitsgemeinschaft der leitenden Medizinalbeamten der Länder" (AGLMB, Association of Senior Medical *Länder* Officials) to design guidelines for uniform *Länder* provisions with a view to full transposition of the provisions of the Infant Formula Advertising Law into *Länder* law.

On the basis of said resolution, a project group, chaired by the *Land* of Hesse, was established. Said project group has prepared a draft for a model ordinance in accordance with Section 4 (4) SNWG on the distribution of articles for information and education purposes. This draft is still being deliberated in the subordinate bodies of the GMK.

IV. Statements obtained for this report on experiences made in connection with the Infant Formula Advertising Law

In order to draw up this report, the Federal Ministry of Health called upon the supreme *Länder* authorities responsible for food-inspection to submit comments on their experiences with the law. In addition, the industrial associations concerned, in particular the "Bund für Lebensmittelrecht und Lebensmittelkunde" (BLL, Food and Drug Law and Nutritional Science Federation) and the "Diät-Verband" (Dietetic Federation), which is most affected by the law, but also federations of the advertising industry, and the "Arbeitsgemeinschaft der Verbraucherverbände e.V." (Union of Consumer Associations) were asked to submit their comments. Further associations asked about their experience with the law included groups advocating breastfeeding, such as the "Arbeitsgemeinschaft Freier Stillgruppen" (AFS, Association of Independent Breastfeeding Groups), the Aktionsgruppe Babynahrung e.V. (AGB, Baby Food Action Group), the German branch of the Leche Liga and associations of the professions concerned such as the "Bundesärztekammer"

(Federal Medical Council), the "Deutsche Gesellschaft für Kinderheilkunde" (German Paediatric Society) and the "Bund Deutscher Hebammen" (Federation of German Midwives). Finally, the Dortmund-based "Forschungsinstitut für Kinderernährung" (Research Institute for Child Nutrition) was asked to describe its insights, too.

The above-mentioned groups were also asked to state their opinions with respect to the task imposed on the Federal Government by the German Bundestag in its recommendation of examining the question of the establishment of a responsible advisory council.

A. Opinions delivered by the supreme *Länder* authorities responsible for official food inspection

On request of the Federal Ministry of Health, the supreme food-inspection authorities of all *Länder* submitted comments for this report.

These comments show that the *Länder*, which are responsible for the implementation of this law, initiated implementation measures soon after the law went into effect.

However, they had to adopt different approaches to those customary in the implementation of food-law-related provisions, which govern the requirements placed on the manufacturing and marketing of foodstuffs through the usual trade channels. This was necessary because the Infant Formula Advertising Law not only governs advertising within the context of normal business dealings, but also contains detailed legal provisions on advertising for infant formulae and follow-on formulae - including the distribution of samples for advertising purposes - in health-care institutions such as Health Offices, hospitals, doctors' surgeries and similar institutions.

To take account of the peculiarities of the implementation of the Infant Formula Advertising Law, the GMK passed a resolution commissioning the AGLMB to draw up guidelines for full implementation of the Infant Formula Advertising Law at its 67th session on November 17/18, 1994. Consequently, a project group, which is chaired by the *Land* of Hesse, was established. It presented a "Draft Resolution for Uniform Application of the Infant Formula Advertising Law and the Commission Directive of 14 May 1991 on Infant formulae and follow-on formulae (91/321/EEC) in the *Länder*" and a model draft for an "Ordinance for Health-Care Institutions" to the AGLMB at its 181st meeting on April 25/26, 1996. In particular, the draft resolution focuses on questions pertaining to interpretation of Section 3(2)(7) SNWG to the extent to which said provision prohibits the distribution of samples and free or reduced-cost infant-formula products to consumers via institutions or persons involved in health care. The draft ordinance for health-care institutions contains guidelines for the distribution of articles for informational and educational purposes that contain advertising for infant formulae and follow-on formulae and may be distributed by health-care institutions. Both the draft resolution and the draft ordinance are still being discussed by subordinate authorities of the GMK, the "Ausschuß

Lebensmittelhygiene und Lebensmittelüberwachung der Arbeitsgemeinschaft der Leitenden Medizinalbeamten der Länder" (ALÜ, Food-Hygiene and Food-Inspection Committee of the Association of Senior Medical *Länder* Officials) and the "Arbeitsgemeinschaft der Leitenden Medizinalbeamten der Länder" (AGLMB, Association of Senior Medical *Länder* Officials). They will be published once the GMK has come to a decision.

As regards the practical implications of and experiences made with the Infant Formula Advertising Law, the comments presented by the supreme *Länder* authorities responsible for official food inspection were essentially in agreement that no infringements of the prohibitions and restrictions contained in the Infant Formula Advertising Law or any other provisions laid down in the law had been registered within the framework of general food inspection, i.e. in the monitoring of the production and marketing of infant formulae and follow-on formulae within normal food trade (i.e. at the producers' or retailers' sites). However, some *Länder* authorities responsible for official food inspection pointed out in their comments that the food-inspection authorities were unable to provide any information re the practical application of the Infant Formula Advertising Law in hospitals or other health-care institutions, e.g. with respect to the distribution of written or audio-visual information materials on the feeding of infants, which also serves the purpose of indirect advertising, or with respect to the presentation of leaflets in doctors' offices. Some *Länder* authorities responsible for official food inspection reported in their comments that the division of responsibilities for the application of the Infant Formula Advertising Law had not yet been completed in the health-care institutions of the *Länder* in question.

A number of *Länder* authorities reported that they had received complaints from interested parties – notably the "Landesverband der Hebammen von Nordrhein-Westfalen" (*Land* Association of Midwives in North Rhine-Westphalia), the "Aktionsgruppe Babynahrung e.V." (AGB; Baby Food Action Group) and breastfeeding groups – about practices in hospitals or other health-care institutions. These *Länder* assume that any infringements of the law will cease once the deliberations on the guidelines on uniform application of the Infant Formula Advertising Law commissioned by the GMK have been completed.

B. Comments submitted by the affected industrial and consumer associations and groups advocating breastfeeding

a) • Industrial associations:

The "Diätverband" (Dietetic Federation), which represents the interests of the producers of infant formulae and follow-on formulae, who are most affected by the law, takes the line that the objectives of the law, namely to support mothers' willingness to breastfeed

and exert a favourable influence on breastfeeding through expert advice, have been achieved to the extent to which the measures stipulated in the law may contribute at all to these objectives.

In addition, the "Diätverband" points out that the producers of infant formulae and follow-on formulae had already been making a contribution to these objectives even before the law went into effect by anticipatory application of Directive 91/321/EEC, which the Infant Formula Advertising Law translates into national law. It cites the following example; even prior to the adoption of the Infant Formula Advertising Law, producers clearly emphasised and pointed out in their statements that mother's milk should take precedence over infant formulae and that infant formulae should only be used on the advice of independent experts in the fields of medicine, nutrition, pharmacology or infant and small-child care.

However, the "Diätverband" complains that application of the provisions laid down in the law is creating problems, mainly because the groups involved are applying different interpretations of undefined legal terms taken over from the EC Directive into national law. In this context, the "Diätverband" refers to a list of alleged infringements of the Infant Formula Advertising Law submitted by the "Aktionsgruppe Babynahrung e.V." (AGV) on July 12, 1995. With respect to these objections, the "Diätverband" submitted a legal opinion drawn up by the "Zentrale zur Bekämpfung unlauteren Wettbewerbs e.V." (Centre for Combating Unfair Competition) of November 13, 1995, in which the infringements of which the AGV accused infant-formula producers are largely refuted.

The "Bund für Lebensmittelrecht und Lebensmittelkunde" (BLL, Food Law and Nutritional Science Federation) and "Zentralausschuß der deutschen Werbewirtschaft" (ZAW e.V., Central Committee of the German Advertising Industry) largely agree with the appraisal of the "Diätverband".

b) "Arbeitsgemeinschaft der Verbraucherverbände e.V." (AGV)

The AGV (Union of Consumer Associations) takes the line that the objectives pursued with the Infant Formula Advertising Law have not been achieved. To justify this comment, it states that, contrary to the prohibitions of the Infant Formula Advertising Law, producers of infant formulae and follow-on formulae continue to advertise in magazines geared to the general public. In addition, it points out that, contrary to the law, producers continue to distribute samples in doctors' offices, in hospitals, through midwives or directly to consumers. The AGV demands that

- the Infant Formula Advertising Law should be amended to introduce more concrete provisions limiting the leeway for "subtle" advertising of any kind;

- the competent supervisory authorities should be induced to effectively control compliance with the provisions of the Infant Formula Advertising Law and prevent infringement by instigating administrative-offence proceedings.

In addition, the AGV regards it as necessary to inform institutions and groups involved in health care, such as hospitals, doctors and midwives, about the Infant Formula Advertising Law.

c) "Arbeitsgemeinschaft Freier Stillgruppen Bundesverband e.V." (AFS)

In its comment, the AFS (Association of Independent Breastfeeding Groups) takes the line that the Infant Formula Advertising Law has not had a significant influence on the marketing strategies of infant-formula producers. According to the AFS, samples are still distributed to mothers in doctors' offices and hospitals. In addition, the AFS complains that, contrary to the provisions of the Infant Formula Advertising Law, advertising is still run in magazines geared to the general public. It complains that the layout and distribution of materials and articles used for informational and educational purposes still fail to comply with the provisions of Section 4 SNWG.

d) "Aktionsgruppe Babynahrung e.V." (AGB)

In its comment, the AGB (Baby Food Action Group) summarises its experience with the Infant Formula Advertising Law as follows: "Germany is being inundated by a veritable flood of advertising that does not comply with the Infant Formula Advertising Law". The AGB refers to the list enclosed to its comments, which details what it regards as infringements of all provisions of the Infant Formula Advertising Law. It points out that it has presented this list of infringements and deplorable states of affairs to the competent food-inspection authorities, but complains that said authorities have not taken any measures. Given the high number of cases in which advertising does not comply with the Infant Formula Advertising Law, the AGB sees considerable need for action on the part of the competent government authorities.

c) "La Leche Liga Deutschland e.V."

According to this organisation, the law is not being applied, since samples and business-reply cards for the distribution of serving-size samples are still distributed to consumers.

C. Opinions presented by associations and organisations of professions concerned

Of the organisations asked to submit a comment, only the breastfeeding representative of the "Bund Deutscher Hebammen e.V." (BDH, Federation of German Midwives) complied with the request. She refers to what she regards as infringements of the Infant Formula Advertising Law, which she subdivides into three categories:

- a) One category refers to the distribution of portion-size quantities of milk-based infant formulae made available free of charge to doctors in hospitals and maternity wards and to independent paediatricians for distribution to mothers. In her opinion, these "portion-size units", which paediatricians claim are distributed for paediatric/clinical indications and to avoid supply bottlenecks, constitute a disguised form of advertising with free samples within the meaning of Section 3(2)(7) SNWG.
- b) A second category she perceives concerns advertisements for infant formulae in the "Deutsche Hebammenzeitschrift" (German Midwife Journal). In her opinion, this form of advertising is not permissible, since this journal cannot be regarded as a publication devoted to scientific matters or child care, but is a trade publication for midwives. She states that the publisher of the "Deutsche Hebammenzeitschrift" had the question of whether advertising for infant formulae is permissible in this journal clarified via the "Verband der Zeitschriftenverleger" (German Federation of Newspaper Publishers). She states that this complaint was rejected by the Lower-Saxon Ministry for Food, Agriculture and Forestry, the argument being that various Land Ministries do not object to the publication of ads in the "Deutsche Hebammenzeitschrift". Even in the event that "Deutsche Hebammenzeitschrift" is, by its nature, considered to be a journal in which advertising for infant formulae is permitted, she believes that the type and layout of the ads in question does not comply with the Infant Formula Advertising Law.
- c) The third category of infringements of the Infant Formula Advertising Law that she perceives relates to prohibited advertising in public. In this category, she includes, amongst other things, advertising for infant formulae in the parent-oriented magazine "Eltern".

D. Comments submitted by other institutions

The Dortmund-based "Forschungsinstitute für Kinderernährung" (Research Institute for Child Nutrition) regards it as desirable to systematically collect the relevant insights gained by official food-inspection authorities with respect to the Infant Formula Advertising Law, unless a comprehensive study on experiences made in connection with the Infant Formula Advertising Law can be carried out in the foreseeable future.

V. Evaluation of the experiences made in connection with the Infant Formula Advertising Law

With the Infant Formula Advertising Law, a legal framework has been created to support the various efforts and measures carried out in pursuance of the goal of ensuring that as many new-borns and infants as possible are breastfed. This legal framework will help to safeguard and promote breastfeeding in the Federal Republic of Germany. The prohibitions and restrictions re advertising for infant formulae and follow-on formulae that have been introduced by the Infant Formula Advertising Law can help restrain influences than might otherwise stand in the way of the education of the population in general and mothers in particular about the advantages of breastfeeding, thus exerting a positive influence on mothers' willingness to breastfeed their infants. In particular, the prohibition on advertising for infant formulae in publications other than scientific or child-care ones, and the prohibition on promoting the use of infant formulae by distributing free samples directly to the consumer or indirectly through institutions or persons involved in health care constitute major restrictions on advertising. What is more, the restrictions re statements on the composition of infant formulae and follow-on formulae or the provisions requiring scientifically founded factual statements contained in the Infant Formula Advertising Law eliminate possibilities of designing inappropriate advertising messages for breast-milk substitutes. In addition, the comments on the preferability of breastfeeding and the recommendation to use breast-milk substitutes only on the advice of medical or nutritional experts that must be included in advertising for infant formulae serve the purpose of encouraging consumers to pursue a responsible and careful approach when it comes to infant feeding. In addition, advertising by means of leaflets that primarily serve the purpose of information and education but are, at the same time, indirect advertising media, and advertising by means of articles for informational and educational purposes have been restricted. Through this wide variety of prohibitions and restrictions on direct and indirect advertising, considerable advertising-free areas have been created, so that mothers are largely free from the influence of advertising when it comes to making their decisions as to whether they want to breastfeed their children.

In fact, the number of mothers deciding in favour of breastfeeding is increasing. Amongst other things, this was corroborated by a comparison of figures collected in studies carried out by the "Institut für Sozialmedizin und Epidemiologie" (Institute for Social Medicine and Epidemiology) of the Federal Ministry of Health in 1991, involving mail surveys in Lower Saxony, North Rhine Westphalia and Berlin (amongst others), as well as by a further mail survey conducted by the Robert Koch-Institute in its function of successor organisation to the Federal Health Office in the autumn of 1995. These studies indicated that the share of exclusively breastfed infants increased from 33% (1991) to 44% in the 3 above-mentioned *Länder*. The figures collected in the above-mentioned regions permit favourable conclusions with respect to breastfeeding in other regions of the Federal Republic of Germany. The influence of the Infant Formula Advertising Law on the favourable trend in breastfeeding cannot be quantified, but it is certainly helpful if mothers – in addition to all the other measures taken to promote breastfeeding – are not exposed to a wide variety of advertising material and distributed samples when making their decisions on how to feed their children.

The Federal Government's assessment of the effects of the Infant Formula Advertising Law remain favourable, despite a number of critical remarks on compliance with the legal provisions and application of the law by the competent authorities voiced in the comments requested from the supreme *Länder* authorities responsible for food inspection, the associations concerned and other interested groups. It is clear from the comments submitted that no serious infringements of the Infant Formula Advertising Law, let alone abuses, have been discovered in the normal marketing process of infant formulae and follow-on formulae, i.e. in the customary marketing of the products via trade channels, and in public advertising. At any rate, the competent *Länder* authorities responsible for food inspection agree that they have so far not seen any necessity to instigate administrative-offence proceedings. Up till now, no court decisions on breaches of provisions of the Infant Formula Advertising Law have been handed down, either. However, account should also be taken of the fact that the Infant Formula Advertising Law went into effect only two years ago and contained a transitional provision according to which advertising material produced prior to the date on which the law went into effect (October 14, 1994) and pursuant to the then valid legislation could still be used until May 1, 1995. Only thereafter did the orders and prohibitions of the law become fully applicable. Consequently, the period used as a basis for appraisal of the effects of the Infant Formula Advertising Law and the experiences made with the law is still very short. On the other hand, the differences of opinion between those affected by the law and the parties interested in the law, and the supervisory bodies can – at least to some extent – also be explained by the fact that practical experience with the application of the law has been limited.

Differences of opinion, such as those relating to the question of whether advertising for infant formulae should be permitted in certain journals, with the answer to such questions depending on whether the journal in question is regarded as a scientific publication or a publication devoted to child care, are questions of interpretation and evaluation that arise frequently in the application of legislation. Such differences of opinion between supervisory authorities, those affected by the law and interest parties re the application of provisions in individual cases will be solved through practical application over certain periods; in the event that such solution proves impossible, these issues must be decided by the courts. This also applies to the list of alleged infringements presented by the AGB, which obviously are seen differently by the official food-inspection authorities, by the affected industrial associations and by the "Zentrale für den unlauteren Wettbewerb".

However, the majority of the supreme *Länder* authorities responsible for food inspection believe that certain omissions with respect to the monitoring and application of the law are currently still possible amongst the institutions and persons involved in health care. This is due to the fact that the official food inspectors do not visit, say, Health Offices, doctors' offices or hospital nurseries and do not carry out inspections there. At the same time, however, the supreme *Länder* authorities feel that the guidelines on enforcement of the Infant Formula Advertising Law and Commission Directive 91/321/EEC of 14 May 1991 on infant formulae and follow-on formulae, which are currently still being deliberated by the subordinate bodies of the GMK, and the projected model ordinance re Section 4

(4) of the Infant Formula Advertising Law will eliminate such omissions. In addition, the authorities assume that the start-up problems that may have arisen in connection with the application of some sections of the law will be solved, once monitoring responsibilities pursuant to the Infant Formula Advertising Law have been assigned clearly in health-care institutions of all *Länder* and work on the model ordinance has been completed.

VI. On the establishment of an advisory council

The Federal Government has tackled the task laid down in the resolution on the Infant Formula Advertising Law, viz. to examine the question of whether an advisory council should be established to analyse advertising messages, very thoroughly. In this context, the Federal Ministry for Health called on the supreme *Länder* authorities responsible for food inspection, the affected industrial and consumer associations, the groups interested in the promotion of breast feeding and the professional organisations concerned for their comments. The written comments submitted to the Federal Ministry for Health paint a very diverse picture, ranging from emphatic objections to firm support of the proposal to establish an advisory council.

A written survey, which was initially submitted to the supreme *Länder* authorities responsible for food inspection, did not lead to an unequivocal position in favour of the establishment of an advisory council. A vote taken on this matter by the German Food Inspection Committee, which dealt with the issue of establishing an advisory council in its meeting of August 28/29, 1996, in connection with the draft model ordinance re Section 4 (4) SNWG that has been prepared by the project group, did not lead to a clear majority for the establishment of an advisory council either. The "Arbeitsgemeinschaft der Leitenden Medizinalbeamten der Länder" (AGLMB, Association of Senior Medical *Länder* Officials), which subsequently had to look into the matter, too, commissioned the Food Inspection Committee to shed further light on this issue.

In contrast, the "Diätverband", which had already demanded the establishment of an advisory council during the parliamentary debate, reiterated this demand. In this context, the "Diätverband" regards it as important to discuss differing opinions on the interpretation of the law in an advisory council or a similar body with a view to reconciling differences on certain advertising measures envisaged by manufacturers.

In contrast, the "Arbeitsgemeinschaften der Verbraucherverbände" and the groups advocating breastfeeding express sceptical or even negative attitudes in their written comments on the establishment of an advisory council. The AgV points out that the establishment of an advisory council should definitely not lead to a situation in which implementation of the law is impeded by official food inspection authorities and new ordinances. The "Arbeitsgemeinschaft Freier Stillgruppen" and the "Aktionsgruppe Babynahrung e.V." (AGB) have submitted similar comments. In other respects, these groups take the line that any influence on the part of the manufacturers should be

eliminated prior to the establishment of an advisory council and that only organisations and institutions promoting breastfeeding should be allowed to influence the decisions of said body.

According to the "Bund Deutscher Hebammen", no independent advisory council for advertising should be established. Instead, a working group should be established within the framework of the existing "Nationale Stillkommission" (National Breastfeeding Commission) of the Robert Koch-Institut (RKI), which should be assigned the additional task of drawing up guidelines for implementation of the Infant Formula Advertising Law and appraisal of advertising messages. However, this suggestion has been firmly rejected by the chairman of the "Nationale Stillkommission" at the RKI. He argues that his commission has neither the personnel nor the material resources to deal with advertising issues.

The Dortmund-based "Forschungsinstitut für Kinderernährung" is in favour of the establishment of an advisory council for advertising, which should tackle the question of whether additional information referring to the composition of infant formulae can be considered to be scientifically founded factual information and, hence, permissible pursuant to Section 3(2)(1) SNWG.

On October 15, 1996, the Federal Ministry for Health convened a meeting for the express purpose of examining issues referring to the establishment of an advisory council, inviting, above all, the supreme *Länder* authorities responsible for food inspection, the affected associations of the food-processing industry, the consumer associations concerned and the groups advocating the promotion of breastfeeding as well as professional organisations concerned such as the "Bundesärztekammer" (Federal Medical Council), the "Deutsche Gesellschaft für Kinderheilkunde" (German Paediatric Society), the "Bund deutscher Hebammen" (Federation of German Midwives) and the RKI's "Nationale Stillkommission". The purpose of this meeting was to clarify the question of which concrete tasks an advisory council could perform and, depending on the answer to this initial question, where installation of such an advisory council would be most useful.

Once again, this meeting did not result in agreement on a clear task profile that would have proven the necessity of establishing an independent advisory council or justified such a council - against the backdrop of the budget situation and the need to avoid unnecessary administrative expenses. The *Länder* pointed out - and the Federal Ministry of Health concurs with them - that such an advisory council could not be responsible for the appraisal of individual advertising measures prohibited or restricted pursuant to the Infant Formula Advertising Law. Instead, such appraisal should be assigned first to the authorities responsible for implementation of the Infant Formula Advertising Law pursuant to *Länder* law and ultimately to the courts. Cases of doubt involving the interpretation of the law from the food-law perspective and any problems pertaining to uniform nation-wide application of the law within the context of official food inspection should be solved by the Food Inspection Committee; technical issues could be referred to the "Arbeitskreis lebensmittelchemischer Sachverständiger" (Association of Experts in Nutritional Chemistry) of the *Länder* and the "Bundesinstitut für gesundheitlichen Verbraucherschutz" (Federal Institute for Consumer Health Protection).

Consequently, the establishment of an advisory council or any other additional body was rejected firmly by a number of *Länder*. A number of *Länder* representatives suggested that the clarification of disputed issues prior to any actual breaches of the law was a possible task for an advisory council for advertising. According to the *Länder*, the objective of such clarification could be to shed light on grey areas in advertising and exert moral influence leading to discontinuation of certain undesirable forms of advertising, even if they are not actually prohibited.

The "Diätverband", which continued to call for the establishment of an advisory council for advertising, suggested that the definition of the legally permissible framework for objective information on the composition of infant formulae and follow-on formulae, which was required in the interests of educating mothers about such products, might constitute another possible task for such an advisory council.

The interested groups and the "Arbeitsgemeinschaft der Verbraucherverbände" again stressed in this meeting that they were more interested in the rapid enforcement of the orders and prohibitions of the Infant Formula Advertising Law than in the establishment of an advisory council.

Conclusion

Examination of the issues pertaining to the establishment of an advisory council in co-operation with the competent supreme *Länder* authorities and the affected groups has shown that there is currently no range of tasks that would require or justify the establishment of an advisory council for advertising. Given the current budget situation, in which the avoidance of any unnecessary administrative expenses is a major priority, the establishment of an advisory council cannot be justified – at least not at present.

Nevertheless the Federal Ministry for Health has declared its willingness to invite the affected industrial associations, the groups interested in issues pertaining to breastfeeding and experts to another meeting, in which the representatives of the supreme *Länder* authorities responsible for food inspection may also participate, if they desire to do so. The affected groups are invited to suggest topics that should be discussed at said meeting. In addition, the Federal Ministry for Health is prepared to organise further "round-table discussions" at any time. It therefore seems advisable to first wait and see how things develop and, if necessary, reopen the question of whether an advisory council should be established at a later date.



MINISTERUL SANATATII
DIRECTIA ASISTENTEI FEMEII SI COPILULUI
Bucuresti, Nr. 1300 din 10 martie 1999

Catre,

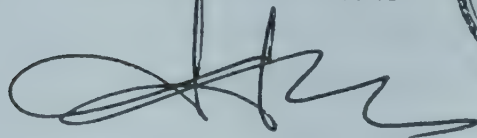
S.E.P.NESTLE -ROMANIA

Guvernul Romaniei a implementat obiectivele si principiile enuntate in Codul International al O.M.S. privind activitatea de marketing in domeniul inlocuitorilor laptelui matern.

Analizind activitatea de marketing in Romania a reprezentantei dvs. afirmam ca modalitatile prezentate sunt in conformitate cu principiile si obiectivele Codului International de Marketing in domeniul inlocuitorilor laptelui matern.

Eliberam in acest sens pentru S.E.P.N.- Romania prezentul CERTIFICAT DE ATESTARE PRIVIND RESPECTAREA PRINCIPIILOR CODULUI O.M.S.

DIRECTOR,
Dr.Dan Th.Viorel



MINISTRY OF HEALTH
DEPARTMENT FOR WOMAN AND CHILD ASSISTANCE
Bucharest, No. 1300 of March 10th, 1999

To

S.E.P. NESTLE ROMANIA

The Romanian Government has enforced the objectives and principles laid down in the International Code of the World Health Organization (WHO) on the marketing activity in the field of replacements for maternal milk.

Having assessed the marketing activity in Romania of your branch we assert that the modalities presented are in accordance with the principle and objectives of the International Marketing Code in the field of replacements for maternal milk.

Therefore we issue for S.E.P.N. Romania the present ATTESTATION CERTIFICATE ON THE OBSERVANCE OF THE WHO CODE PRINCIPLES.

DIRECTOR,
Dr. Dan Th. Viorel
signed illegibly
official seal

I, the undersigned IUSTIN MANCIU, a Sworn Translator, authorized by the Ministry of Justice by Licence no. 1086, certify the accuracy of this translation with the text of the authentic document in Romanian which was viséed by me.

BIROUL NOTARULUI PUBLIC
ENISE ELIEAN

Sediul: Bucuresti, B-dul Nicolae Bălcescu nr.25
sc.2, et.1, ap.18/19 sector 1
Cod fiscal: 8078293

Sworn Translator,

J. Manci

ROMANIA

OFFICE OF NOTARY PUBLIC



AUTHENTICATION NO. 1670 OF TRANSLATOR'S SIGNATURE
Year 1999, Month 03 Day 14
ENISE ELIEAN

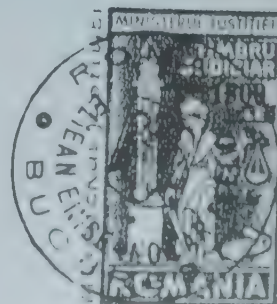
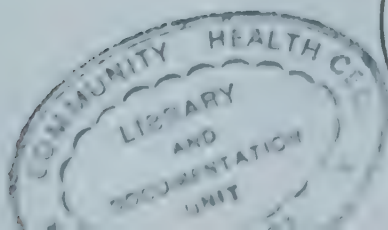
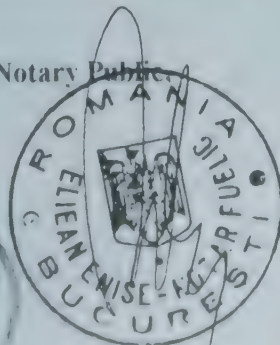
I, the undersigned.....NOTAR PUBLIC..... a Notary Public, in accordance with Art. 8, letters (c) and (j) of Law no. 36/1995, do authenticate the signature of IUSTIN MANCIU., a Sworn Translator, as apposed in front of me on the _____ copies of this document.

Revenue stamps 5000 lei as apposed on each copy of the document.

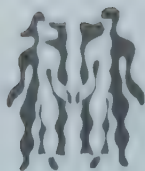
Judicial stamps 1500 lei as apposed on the first copy of the document.

Notary's fee 15000 lei paid against receipt no. 751

Notary Public



06021



Ministério da Saúde
Direcção-Geral da Saúde

DECLARAÇÃO

O Governo Português implementou os princípios e objectivos do Código Internacional de Comercialização dos Substitutos do Leite Materno adoptado pela 34ª. Assembleia Mundial de Saúde, através da publicação do Decreto-Lei nº. 115/93 de 12 de Abril.

Em satisfação da solicitação da Nestlé Portugal, S.A., confirmamos que tanto quanto é do nosso conhecimento as práticas seguidas por esta Companhia na comercialização dos seus leites/fórmulas para lactentes estão de acordo com o referido Decreto-Lei.

Lisboa, 25 de Fevereiro de 1999

Divisão de Saúde Ambiental

A Chefe de Divisão

Maria Portugal Ramos
Por Delegação
Maria Portugal Ramos

DECLARATION

The Portuguese Government implemented the principles and aims set out in the International Code of Marketing of Breast-milk Substitutes adopted by the 34th World Health Assembly, by publishing Decree No. 115/93 on 12 April.

At the request of Nestlé Portugal, S.A., we confirm that, to the best of our knowledge, the practices followed by the Company regarding the marketing of its infant milks/formulae are in line with the abovementioned Decree.

Lisbon, 25 February 1999

Environmental Health Division

The Head of the Division

Maria Portugal Ramos
By delegation

Maria Ramos Portugal

РЕПУБЛИКА БЪЛГАРИЯ
МИНИСТЕРСТВО НА ЗДРАВЕОПАЗВАНЕТО
MINISTRY OF HEALTH

София 1000, пл. „Св. Неделя“ 5 тел.: 86 31; телекс: 22 430, 23 645; факс: 981 18 33
5 „Sv.Nedelia“ Sq.1000 Sofia, tel. (+3592) 86 31; telex 22430, 23654; fax (+3592) 981 18 33

Изх. № 26-00-1861 02.07.1999г.

София

ДО

НЕСТЛЕ СОФИЯ АД
бул. „Европа“ 128
София

На No 158/30.03.1999г.

Във връзка с Вашето питане в писмото под горния номер Ви уведомяваме, че към настоящия момент на Министерството на здравеопазването не са известни нарушения от страна на фирмата НЕСТЛЕ СОФИЯ АД, по прилагането на изискванията на Commission directive 91/321/ЕЕС on infant formulae and follow up formulae, свързани с маркетинговите дейности по отношение на адаптираните млека.

Посочената директива на този етап не е въведена в националното законодателство.

ЗАМ. МИНИСТЪР И
РЕПУБЛИКА
БЪЛГАРИЯ
ГЛАВЕН ДЪРЖАВЕН
САНИТАРЕН ИНСПЕКТОР:
* СОФИЯ *

доц. д-р Ив. Златаров

REPUBLIC OF BULGARIA
MINISTRY OF HEALTH

Sofia 1000, 5, St. Nedeljia Sq., tel: (+359 2) 86 31, fax: (+ 359 2) 981 18 33

Outgoing No. 26-00-186/02.04.1999

To: Nestle Sofia A.D.
128, Europe Blvd.
Sofia

To your No. 158/30.03.1999

Referring to your inquiry in the letter under the above number, we inform you that as of current moment, the Ministry of Health is not aware of violations on the side of Nestle Sofia A.D., on the application of the requirements of the Commission directive 91/321/EEC on infant formulae and follow up formulae, connected with the marketing activities on the infant formulae.

The mentioned directive is not introduced in the national legislation at this stage.

Deputy Minister and Chief State Sanitary Inspector: /s/

/Dr. Iv. Zlatarev/

Vereinigung Schweiz. Hersteller von Diät- und Kraftnahrung («Vereinigung Diät»)

Mitglied der "Foederation der Schweiz. Nahrungsmittel-Industrien (FIAL)"

Elfenstrasse 19, 3000 Bern 16

Telefon 031 352 11 88

Telefax 031 352 11 85

AKTENNOTIZ

der 8. Sitzung des Codex-Panels vom Dienstag, 27. Oktober 1998, 14.00 bis 16.50 Uhr,
im Sekretariat der Vereinigung Diät, Elfenstrasse 19, Bern

Teilnehmer:

a. Seitens der UNICEF-Arbeitsgruppe

- Herr Prof. Dr. K. Baerlocher, SGP, St. Gallen
- Frau A. Lappé, Koordinatorin UNICEF-Arbeitsgruppe
- Frau J. Thomann Lemann, IBCLC / LLL
- Herr W. Wörnhard, UNICEF Schweiz

b. Seitens der Hersteller

- Herr C. Haenggli, Hipp GmbH/Vivosan AG
- Frau Ch. Kieni, Wander AG
- Herr U. Preysch, Nestlé Suisse SA
- Frau I. Wettach, Milupa SA (für Herrn O. Bachmann)
- Fürsprecher B. Hodler, Geschäftsführer "Vereinigung Diät"

Entschuldigt:

- Frau A. Wittenwiler, SHV
- Herr O. Bachmann (vertreten durch Frau I. Wettach)

Leitung: Herr W. Wörnhard

Protokoll: Fürsprecher B. Hodler

* * *

I. TRAKTANDEN:

1. Aktennotiz der 7. Panel-Sitzung vom 29.4.1998 / Zusammenfassung der Beschlüsse
2. Zusammensetzung des Panels / Situation Schweizerische Unicef-Arbeitsgruppe
3. Bimbosan AG / Besprechung der Unterlagen
4. Gratislieferungen an Kliniken, Kontrolle
5. Tees für Säuglinge
6. Spezialnahrungen bei Durchfall und Aufstossen
7. WHA vom Mai 1998 in Genf und Codex Alimentarius / Diät-Komitee vom September .
in Berlin (Altersindikationen)
8. Diverse Beanstandungen
9. Verschiedenes / Termine

II. VERHANDLUNGEN:

1. Aktennotiz der 7. Panel-Sitzung vom 29.4.1998 / Zusammenfassung der Beschlüsse

Die Aktennotiz und die aktualisierte Zusammenfassung der Beschlüsse werden genehmigt.

2. Zusammensetzung des Panels / Situation Schweizerische Unicef-Arbeitsgruppe

Fürsprecher Hodler teilt mit, dass die Firma Wander AG bis auf weiteres durch Frau Ch. Kieni vertreten wird. Die Firmen Hipp GmbH/Vivosan AG werden durch Herrn C. Haenggli vertreten.

Herr Wörnhard orientiert über die Gespräche, die nun mit der Direktion des BAG (Herrn Prof. T. Zeltner) eingeleitet werden konnten. Im Auftrag des BAG, der Stiftung für Gesundheitsförderung und der UNICEF Schweiz erarbeitet eine externe Beratungsfirma (Price Waterhouse Coopers) ein Konzept unter dem Titel "Zusammenarbeitsformen und Finanzierung der Stillförderung". Der entsprechende Bericht wird bis anfangs Dezember 1998 erwartet. Ein Gesuch um Überbrückungsfinanzierung ist bei der Stiftung für Gesundheitsförderung hängig. Falls diese Arbeiten nicht zu konkreten Fortschritten führen, müsste die UNICEF auf eine Mitarbeit im Codex-Panel im Laufe des Jahres 1999 verzichten.

Ergebnis: Das Panel nimmt von diesen Informationen zustimmend Kenntnis.

3. Bimbosan AG / Besprechung der Unterlagen

Das Codex-Panel bespricht das Werbematerial und die Packungen der Firma Bimbosan AG (Beilage zum Zirkular vom 9. Sept. 1998).

Aus der Sicht der UNICEF-Arbeitsgruppe entspricht die Werbebroschüre in keiner Weise dem Sinn und Geist des Codex. Beanstandet wird insbesondere das Signet in Form eines personifizierten Nuggis, der nur am Ende der Broschüre erscheinende Hinweis auf die Vorrangigkeit der Muttermilch, bzw. des Stillens, der Ernährungsplan und die Altersindikationen. Die kritisierten Punkte sind in einem schriftlichen Bericht zusammengefasst (vgl. Anhang).

Seitens der Hersteller wird zusätzlich auf einige mit Art. 182 LMV nicht im Einklang stehende Deklarationen hingewiesen (Sachbezeichnungen, "wichtiger Hinweis" gemäss Art. 182, Abs. 6, Altersindikationen etc.).

Herr Prof. Baerlocher kritisiert zudem, dass therapeutische Massnahmen und allgemeine Ernährungsregeln nicht klar auseinander gehalten werden.

Ergebnis:

1. Fürsprecher Hodler wird beauftragt, die Bemerkungen der UNICEF-Arbeitsgruppe und die Kritikpunkte bezüglich LMV-Konformität zusammenzufassen und im Sinne der Diskussion zu bereinigen.
2. Der Firma Bimbosan AG ist ein persönliches Gespräch anzubieten. An diesem nehmen seitens des Panels Frau A. Lappé, Herr Prof. K. Baerlocher und Fürsprecher B. Hodler teil (*Termin: 24. November 1998, 15 00 Uhr in Zürich.*)

4. Gratislieferungen an Kliniken, Kontrolle

Herr Wörnhard verweist auf das Schreiben von Frau A. Lappé vom 3. Oktober 1998. Die fehlende Möglichkeit einer Kontrolle über die Einhaltung des Verbotes von Gratislieferungen stellt eine "Achillesferse" dar. Mit einem einfachen und wirkungsvollen Kontrollmechanismus sollte derartigen Gerüchten entgegen getreten werden. Eine gewisse Kontrolle ist bei der Evaluation von "stillfreundlichen Kliniken" möglich. Kontrollen könnten entweder bei der Industrie oder direkt in den Spitälern ansetzen.

Herr Preysch ist der Überzeugung, dass sämtliche Hersteller die Fakturierung der Lieferungen von Normalware an die Kliniken im Griff haben.

Gratisware wird nur bei Vorliegen eines Sozialfalles und aufgrund einer Anfrage oder Anweisung eines Arztes, einer Fachperson oder eines Sozialamtes (z.B. zugunsten einer Flüchtlingsfamilie geliefert); die Auslieferung erfolgt über den Antragsteller.

In kleinen Geburtskliniken kann nicht ausgeschlossen werden, dass ein Teil der Muster für den Eigenbedarf verwendet wird. Es kann sich dabei jedoch nur um einzelne Geburten handeln, bei denen die Mutter nicht in der Lage ist, zu stillen.

Das Panel diskutiert die folgenden möglichen Massnahmen:

- Einfordern einer schriftlichen Bestätigung der Spitäler, wonach Muster nur zur Abgabe an austretende Mütter bestimmt sind und nicht zur Deckung des Eigenbedarfs verwendet werden dürfen.
- Aufforderung an die Spitäler, die für den Einkauf zuständige Person zu melden.
- Erteilung eines Auftrages an eine Revisionsstelle zur Durchführung von stichprobenweisen Kontrollen bei den Herstellern und den Spitälern.
- Schaffung eines einheitlichen Musterbestellformulars mit dem Hinweis, dass Muster nur als solche und nicht für den Eigenbedarf verwendet werden dürfen.

Ergebnis:

1. Die UNICEF-Arbeitsgruppe prüft die Möglichkeit eines Schreibens an alle Geburtskliniken mit dem Ziel:
 - Nennung der für den Einkauf von Säuglingsanfangsnahrungen zuständigen Person / Abteilung
 - Bestätigung, dass sämtliche Originalware bezahlt wird
 - Erhebung der Mengen in einer zu definierenden Periode.
2. Die Hersteller prüfen mögliche Kontrollinstrumente, wie z.B.
 - Liste der belieferten Spitäler
 - Gelieferte Mengen von Originalware
 - Angeforderte und gelieferte Mengen an Mustern.

5. Tees für Säuglinge

Frau Lappé weist auf die grundsätzliche Übereinstimmung hin, wonach das Stillen mindestens während den ersten 4 Monaten zu schützen ist und während dieser Zeit, sofern nicht gestillt werden kann, nur Säuglingsanfangsnahrungen einzusetzen sind. Vermehrt werden Säuglingstees "ab Geburt" angeboten. Solche Produkte können rasch zum Abstillen führen. Sie sind sowohl für gestillte wie für flaschenernährte Säuglinge nicht notwendig. Es wird auf eine Korrespondenz mit der Firma Sidroga AG verwiesen.

Herr Haenggli nimmt zum Hipp-Fencheltee mit der Indikation "ab erster Woche" Stellung. Ein "Früchtetee" wird ab 6. Monat und ein Kindertee "nach 4 Monaten" positioniert. Beim Fenchel- und Kamillentee handelt es sich um Indikationstees, weshalb sie ab erster Woche indiziert sind.

Die Firma Hipp GmbH ist bereit, den Hinweis "ab erster Woche" künftig wegzulassen.

Frau Wettach bestätigt, dass die Firma Milupa 2 IKS-registrierte Tees führt, die jedoch keine Altersindikationen tragen. Alle anderen Tees werden mit dem Hinweis "nach 4 Monaten" angeboten.

Herr Wörnhard schlägt vor, einen einheitlichen Hinweis auf Packungen und in Prospekten einzuführen z.B. mit folgendem Inhalt:

- "Normal gestillte Kinder brauchen keine zusätzliche Flüssigkeit"
- "Tee (mit Schoppen verabreicht) kann das Stillen erschweren"
- "Säuglingstees sind keine weiteren Süssigkeiten (Zucker, Honig etc.) beizumischen".

- Ergebnis:
1. Das Panel spricht sich dafür aus, dass Indikationstees (z.B. IKS registrierte und andere) keine Altersindikation aufweisen.
 2. Das Panel begrüsst die Ausarbeitung einheitlicher Hinweise im Sinne des Vorschlages von Herrn Wörnhard. Die Ernährungskommission der SGP wird ersucht, dazu Empfehlungen abzugeben.
 3. Die Firmen Hipp GmbH, Milupa SA und Nestlé Suisse S.A. werden ersucht, dem Sekretariat Etiketten, bzw. Packungen sämtlicher Säuglings- und Kindertees zuhanden des Panels zur Verfügung zu stellen.

6. Spezialnahrungen bei Durchfall und Aufstossen

Das Panel diskutiert die Bemerkungen von Frau A. Lappé gemäss Schreiben vom 4. Oktober 1998 (Seite 2). Es geht um die Produkte "Beba"-Spezialnahrung (Nestlé), AR1 und AR2 (Milupa SA) und Adapta Digest (Wander AG).

Prof. Baerlocher ist der Auffassung, dass es sich um Spezialnahrungen für ganz bestimmte Indikationen handelt. Sie sind wissenschaftlich bei Durchfall mit Allergieprävention angezeigt. In Frage kommen solche Produkte jedoch nur für nicht gestillte Kinder.

Herr Preysch hält fest, dass diese Spezialnahrungen nur im Fachhandel abgegeben werden. Sie tragen den Hinweis, dass bei Durchfall in jedem Fall der Arzt beizuziehen ist.

Er erklärt sich bereit, bei "Beba" den Hinweis "für nicht gestillte Säuglinge" aufzunehmen.

Die Firmen Wander AG und Milupa SA schliessen sich dieser Aussage an.

- Ergebnis:
- Das Panel nimmt zur Kenntnis, dass die Hersteller künftig die Packungen von Spezialnahrungen mit dem Hinweis "für nicht gestillte Säuglinge" ergänzen.

7. WHA vom Mai 1998 in Genf und Codex Alimentarius / Diät-Komitee vom September in Berlin (Altersindikationen)

Fürsprecher Hodler stellt fest, dass sowohl anlässlich der Weltgesundheitsversammlung (Mai 1998 in Genf) wie im Diät-Komitee des Codex Alimentarius (September 1998 in Berlin) die Frage der Altersindikation erneut zur Diskussion gestellt wurde.

Herr Wörnhard bestätigt, dass die UNICEF und andere Organisationen die geschützte Stillzeit auf 6 Monate festlegen wollen. UNICEF Schweiz erachtet eine Periode von 4 - 6 Monaten als sinnvolle Grundlage.

8. Diverse Beanstandungen

a. Hipp-Beikost-Nahrungen "nach 3 Monaten"

Herr Haenggli orientiert über die bei der Firma Hipp vorgenommenen Umstellungen. Die über Migros verkauften Gläser und Säfte tragen alle die Altersindikation "nach 4 Monaten". Im Fachhandel hat sich die Umstellung wegen einer Produktionsverlagerung sowie Rezepturänderungen (mit erforderlicher neuer Registrierung beim BAG) verzögert. Zudem können die Bio-Produkte nur einmal im Jahr produziert werden. Seit Ende 1997 werden alle neu produzierten Beikostnahrungen mit der Altersindikation "nach 4 Monaten" etikettiert. Die im Laufe des Jahres 1997 hergestellten Nahrungen haben eine Mindesthaltbarkeitsdauer, bzw. Verkaufsfrist von 3 Jahren.

Ergebnis: Das Panel nimmt von diesen Informationen Kenntnis.

b. Werbeprospekt für "Mulimil 1" im Present-Service

Frau Wettach teilt mit, dass der Prospekt für "Mulimil 1 bio" nicht mehr im Geschenkköfferchen des Present-Service enthalten ist.

Ergebnis: Das Panel nimmt von dieser Aussage zustimmend Kenntnis.

c. Muster von Anfangsnahrungen zur Selbstbedienung (Apotheke Chailly, Lausanne)

Die von Frau Brauen eingegangene Information gibt Anlass, nochmals die Verwendung von Mustern in Apotheken und Drogerien zu diskutieren. Die Hersteller weisen darauf hin, dass kein Interesse besteht, Muster zur freien Bedienung aufzulegen. Eine Kontrolle des Fachhandels ist deshalb schwierig, weil die Besuche des Aussendienstes nur ein- bis dreimal pro Jahr stattfinden.

Ergebnis: Das Panel fordert die Hersteller auf:

- Die Abgabe von Mustern restriktiv zu handhaben.
- Den Aussendienstern strikte Anweisungen zu geben, frei aufgelegte Muster zu entfernen und im Gespräch die Apotheker/Drogisten auf die Empfehlungen des Panels aufmerksam zu machen.

d. Unaufgeforderte Zustellung von Werbematerial und Mustern (Wander AG)

Das Panel diskutiert einen Hinweis von Frau Brauen, wonach die Firma Wander AG Muster von Adapta 1 und 2 an eine Mutter kurz nach Austritt aus der Geburtsklinik in Morges zugestellt hat.

Frau Kieni stellt fest, dass die Firma Wander AG weder von der Geburtsklinik in Morges noch von anderen Geburtskliniken Adressen erhält. Diese werden ausschliesslich über die bekannten Quellen (Felicitas-Service, Künzler-Bachmann AG) beschafft. Die Firma Wander AG kann den Einzelfall jedoch nur überprüfen, wenn der Name der betreffenden Mutter mitgeteilt wird.

Eine unaufgeforderte Zustellung von Mustern erfolgt grundsätzlich nicht.

e. Bestellkarte für Geschenkartikel, kombiniert mit Muster für Säuglingsanfangsmilch (Wander AG)

Das Panel diskutiert aufgrund einer Meldung seitens einer Hebamme aus Vulliens die Bestellkarte der Firma Wander AG. Diese enthält am Ende ein Feld, bei welchem auf die Zustellung eines Musters verzichtet werden kann.

Frau Kieni ist nach Rücksprache mit Herrn Racine der Auffassung, dass die Bestellkarte im Sinne der Beschlüsse des Codex-Panels korrigiert wurde.

Ergebnis der Abklärungen:

Die Ausführungsbestimmungen (März 1997) halten zu Ziff. 3.6 "Abgabe von Proben und Mustern" unter Ziff. 10 folgendes fest:

"Bestellkarten sind so auszugestalten, dass daraus die Anforderung von Mustern von Säuglingsanfangsnahrungen klar ersichtlich wird. Bei einer Bestellung, die andere Produkte als Säuglingsanfangsnahrungen anfordert, darf nicht ein Muster von Säuglingsanfangsnahrung abgegeben werden."

Die Bestellkarte der Firma Wander AG wurde zudem an der 4. Sitzung des Codex-Panels vom 23.10.1996 (Trakt. 5, Seite 5) besprochen. Das Panel nahm zur Kenntnis, dass die Bestellkarte der Firma Wander AG korrigiert wurde.

Ergebnis: Die Firma Wander AG überprüft die aktuell verwendete Bestellkarte.

f. Inserate für Adapta 1, 2, 3 (Wander AG) / "Blumentöpfe"

Diese Beanstandung wird aus Zeitgründen erst an der nächsten Sitzung behandelt.

9. Verschiedenes / Termine

a. Eingabe der GIFA an den Direktor des BAG vom 2. Oktober 1998

Das Panel nimmt Kenntnis vom Schreiben von Herrn Prof. T. Zeltner (BAG) vom 26. Oktober 1998, mit welchem eine Stellungnahme zu einer Eingabe der "Geneva Infant Feeding Association (GIFA)" vom 2. Oktober 1998 verlangt wird.

Ergebnis: 1. Die kritischen Hinweise bezüglich der Geschenkkoffer (Felicitas und Present-Service) werden als Beanstandung zuhanden des Codex-Panels entgegengenommen.

Frau A. Lappé und Fürsprecher B. Hodler werden beauftragt, den Inhalt der Geschenkkoffer sowie die Aussände der Herstellfirmen in den ersten vier Monaten auf Codex-Konformität zu überprüfen.

2. In einem Bestätigungsschreiben an Prof. T. Zeltner (BAG) sind die Vorwürfe der GIFA bezüglich "geheimer" Tätigkeit des Codex-Panels unter Hinweis auf die diversen Publikationen (BAG-Bulletin, Pressecommuniqué anlässlich der Stillwoche 1997) zurückzuweisen.
3. Auf Vorschlag von Herrn Wörnhard wird eine Medienorientierung über die Tätigkeit des Codex-Panels beschlossen. Provisorischer Termin: Freitag, 11. Dezember 1998, vormittags.

Fürsprecher Hodler wird beauftragt, die Sammlung der bisherigen Beschlüsse thematisch zu gliedern.

b. "Milupa-Cup" (Fussballturnier) der Kinderärzte

Herr Wörnhard und Frau Thomann weisen auf eine Ausschreibung für ein Fussballturnier unter dem Titel "Milupa-Cup" für Pädiater und Kinderkliniken hin. Sie erkundigen sich nach dem Hintergrund und geben ihrer Befürchtung Ausdruck, dass eine solche Veranstaltung als Beeinflussung der Ärzteschaft empfunden werden könnte.

Frau Wettach teilt mit, dass dieses Fussballturnier seit 30 Jahren von der Firma Milupa organisiert wird (ursprünglich initiiert durch einen Mitarbeiter der Milupa SA, welcher aktiver Spitz Fussballer war). Es wird an diesem Anlass keinerlei Produktwerbung betrieben.

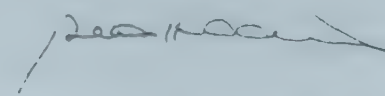
Ergebnis: Die Firma Milupa SA dokumentiert Herrn Wörnhard über den Hintergrund dieses Turniers, die Ausschreibung und das Programm.

c. Nächste Sitzung

Die nächste Sitzung des Codex-Panels wird auf **Dienstag, den 18. Mai 1999, 14.00 Uhr**, im Sekretariat Elfenstrasse 19, festgelegt.

Schluss der Sitzung: 16.50 Uhr

Für die Aktennotiz:



Beat Hodler, Fürsprecher

Kommentar von A. Lappé und J. Thommen (UNICEF-Arbeitsgruppe)

Das Signet aller Bimbosan-Produkte, welches auch auf dem Briefkopf erscheint, ist ein personifizierter Nuggi.

Der Internationale Kodex, der die Grundlage zum schweizerischen Kodex bildet, betrifft nicht nur Säuglingsanfangsnahrung, sondern auch Flaschen und künstliche Sauger. Das Signet steht daher im Gegensatz zu den Intentionen des Kodex.

Die Broschüre mit dem eifrigen „Bimbo“ auf der Titelseite zur Beschreibung der ganzen Produkte-Linie der Bimbosan-Spezial-Kindernahrung erwähnt eingangs mit keinem Wort das Stillen, sondern wirbt für die Bimbosan-Produkte als die „vollwertige und natürliche Ernährung“ des Säuglings, was wir sachlich und nüchtern als eine falsche Aussage bezeichnen können. Die natürliche Ernährung des Säuglings ist klarerweise die Muttermilch.

Erst auf der viertletzten Seite der Broschüre wird auf die Muttermilch hingewiesen, aber in einer Weise, die völlig inakzeptabel ist.

In der Tabelle „Bimbosan-Baukastensystem“ werden ab ca. 1. Monat drei Produkte empfohlen, die offenbar erst neuerdings auf der Packung mit „nach 4 Monaten“ bezeichnet werden.“

Das Primosan-Gemüse wird sowohl auf dem Ernährungsplan als auch auf der Packung nach „ca. 3 Monaten“ empfohlen. Nicht zulässig.

Das Bimbosan-Baukasten-System benützt als Einteilung, resp. Indikation für die Wahl der Produkte die Art des Stuhlgangs. Das ist abzulehnen, denn es ist nicht eindeutig, was unter „dünnem Stuhl“ und „normalem Stuhl“ zu verstehen ist. Bei einem gesunden, gestillten Säugling ist der Stuhl - im Vergleich zum Stuhl eines älteren Kindes - „dünn“.

Therapeutische Massnahmen werden von allgemeinen Ernährungsregeln nicht klar auseinandergehalten.

Die Broschüre entspricht in keiner Weise dem Sinn und Geist des Kodex.

Säuglingsanfangsnahrungen:

Bimbosan-Säuglingsmilch und Biosoja (ab 1. Tag) : Der Hinweis „*Muttermilch ist ideal für den Säugling. Genügt diese nicht oder kann nicht gestillt werden....*“ ist eine unglückliche Formulierung. Das gilt auch für die französische Version. „*s'il ne suffit pas*“, denn das „Ungenügen“ bezieht sich auf Quantität und Qualität der Muttermilch. Vorschlag: *Wird nicht oder nicht mehr gestillt, kann während der ersten Monate ein Schoppen mit Bimbosan Säuglingsmilch zubereitet werden. Sie ist leicht verdaulich....*

Biosoja: Unter der Rubrik „Dosierung für einen Schoppen“ wird von 5 bis 6 kg an empfohlen, dem Kind 1 Teller Brei von diesem Produkt anzubieten. Das ist keine Altersangabe. Viele Kinder sind mit 2 oder 3 Monaten bereits so schwer, aber für Löffelmahlzeiten trotzdem noch nicht bereit.

Produkte, die als Zusätze zur Anfangsnahrung oder als Folgenahrung empfohlen werden und zwar auch als Zusätze zur Muttermilch:

Solche „Kombi-Produkte“ sind zu vermeiden; ein Angebot von Zusätzen zur Muttermilch während der ersten vier Monate ist nicht zulässig.

Hosanan-Schoppenzusatz und Brei, Reis-Schleim sowie Bio-Hirsana (ohne Milch) :
„Kann - im Einverständnis mit einer Fachperson - als Zusatznahrung zur Säuglings-Anfangsmilch, bereits nach der 2. Woche gegeben werden - wenn die Muttermilch „nicht genügt“.

Der Hinweis auf die ungenügende Muttermilch steht auch auf der Etiketle zum Reis-Schleim, zum Hafer-Schleim und auf dem Nachfüllbeutel und zu Hosana- (3-Korn mit Sojamehl).

Beikost:

Primosan: Gemüse für Schoppen und Brei, ohne Milch

„nach 3 Monaten“ wie bereits erwähnt, nicht zulässig; es muss „nach 4 Monaten“ heissen.

Der „wichtige Hinweis“ auf der Etiketle zur Primosan-Dose ist fehl am Platz, denn Beikost ist kein „leicht verdaulicher Ersatz“ für Muttermilch.

Bimbosan, 5-Korn Spezial-Kindernahrung: Der Hinweis, dass wenn Muttermilch nicht genüge, dieses Produkt als Zusatznahrung zur Säuglings-Anfangsmilch gegeben werden könne, ergibt keinen Sinn.

Bei den anderen Produkten handelt es sich um Folgenahrung, die nur am Rande Gegenstand unserer Besprechungen ist. Aber wenn Birchermüesli-Flocken schon nach 6 Monaten mit Joghurt und gewöhnlicher Milch empfohlen werden, so ist das doch wohl für Kleinkinder nicht bekömmlich

Vereinigung Schweiz. Hersteller von Diät- und Kraftnahrungen Fachgruppe Kindernährmittel

Schweizerische UNICEF-Arbeitsgruppe für die Förderung des Stillens

Codex-Panel / Zusammenfassung der Beschlüsse (Stand Oktober 1998)

1. Sitzung vom 13. September 1995

- Genehmigung des Reglementes für die Zusammensetzung und die Arbeitsweise des Codex-Panels.
- Abgrenzung des Geltungsbereichs des Codex: Der Codex bezieht sich auf Säuglingsanfangsnahrungen nach Art. 182.1 + 3 LMV.
- Aussprache über den möglichen Inhalt von Ausführungsbestimmungen zum Verhaltens-Codex.
- Gemäss Reglement: Berichterstattung über die Tätigkeit des Panels in gemeinsamen Verlautbarungen. Die Protokolle der Panelsitzungen sind dagegen vertraulich zu behandeln.

2. Sitzung vom 7. Dezember 1995

- Kenntnissnahme und Diskussion der Studie „Stillhäufigkeit und Stilldauer in der Schweiz 1994“.
- Eingehende Diskussion der Liste „Breaking the Rules“ / Verstösse gegen den Codex: 1994 und 1995.
- Erste Grundsatzdiskussion zur Abgabe von Mustern (vgl. Ergebnisse unter "3. Sitzung").
- Altersindikation für Folgenahrungen/Beikost:

Um das Stillen während der ersten vier Monate zu schützen, wird auf die Vermarktung von Folgenahrungen und Beikostprodukten zum Gebrauch während der ersten vier Monate verzichtet. (Auch die Säuglingsanfangsnahrung deckt den vollen Nahrungsbedarf der Säuglinge während der Saug-Trink-Phase. Zusatzflüssigkeit und Zusatznahrung sind mindestens während der ersten vier Monate unnötig.)

- Durchsetzung der Indikation "nach 4 Monaten" (revLMV Art. 182, Abs. 2) im Zuge der Packungsanpassungen.

- Erstellung einer Übersicht über die Haltbarkeitsfristen (abgegeben).

- Allgemeine Firmen- und Markenwerbung:

Das Anbringen des Firmenlogos ohne Verbindung zu einer Säuglingsanfangsnahrung (z.B. Fotos, Gewichtskontrollblättern, „Pässen“ etc.) ist nicht zu beanstanden.

- Besprechung einzelner Beanstandungen.

3. Sitzung vom 2. Mai 1996

- Schlussberatung der „Liste Breaking the Rules“. Daraus ergeben sich die folgenden Beschlüsse:

- Beikost: Das Panel stellt fest, dass alle Hersteller die Altersindikation für Beikostprodukte generell auf „nach vier Monaten“ korrigieren. Das gilt für alle Beikost-Produkte, die ab 1996 hergestellt werden. Während der Dauer der Haltbarkeitsfrist können noch alte Packungen im Markt angeboten werden (alte Packungen, die bereits bei den Grossisten oder auf dem Markt sind, werden nicht zurückgezogen). (M 7 "Breaking the Rules")
- Ab Mitte 1996 gilt dies auch für das Hipp-Sortiment.
- Säfte sollten ebenfalls erst nach dem 4. Monat angepriesen werden.
- „Wichtiger Hinweis“: Packungsänderungen erfolgen in einem rollenden Prozess. Alle Änderungen, über die eine Einigung erzielt wurde, werden in den Neudrucken umgesetzt. Das betrifft u.a. den Aufdruck des „wichtigen Hinweises“, der gut sichtbar platziert werden muss (nicht mehr auf dem Schachtelboden).
- Ernährungsinformation: Die Hersteller sind bereit, auf Hinweise (in der Werbung und auf Packungen) wie „der Muttermilch sehr ähnlich“ oder „der Muttermilch gleichwertig“ zu verzichten (G-1).
- In Ernährungstabellen, resp. -Plänen, soll auch auf die Muttermilch hingewiesen werden (Allg. 6).
- Verzicht auf an die Väter gerichtete Werbung mit Säuglingsanfangsnahrungen (Vater/Kind/Schoppen-Szene).
- Auftrag zur Kontaktnahme mit den nicht im Panel vertretenen Firmen zwecks Durchsetzung des Codex und der Panel-Beschlüsse (Holle Nahrungsmittel AG, Sántis Milchpulver AG, Vivosan AG).

- Muster:

- Muster sollen nicht bloss zu Werbezwecken abgegeben werden. Eine Musterabgabe ist in folgenden Fällen sinnvoll:
 - wenn die Mutter abstillen will
 - als Überbrückung, wenn die Mutter Angst hat, nicht ausreichend Milch abgeben zu können (z.B. bis die Mutter die Hilfe einer Stillberatung in Anspruch nehmen kann)
 - bei Vorliegen ausserordentlicher gesundheitlicher Faktoren (Medikamenteneinnahme, Unfall, körperliche oder physische Krankheit).
- Muster werden dem Fachpersonal nur auf ausdrückliche Aufforderung abgegeben.
- Als Muster erlaubt sind Portionenbeutel (25/26 g) und Musterpackungen (bis 200 g). Alle Packungen sind deutlich als „Muster“ zu kennzeichnen. Der Packungsinhalt (Nettogewicht) ist anzugeben.
- Die Muster sollen den „wichtigen Hinweis“ auf die Vorrangigkeit des Stillens gut sichtbar tragen.
- Es wird beschlossen, in einem gemeinsamen Brief die Apotheken und Drogerien auf den Inhalt des Codex aufmerksam zu machen, die Bedeutung der Beratung hervorzuheben und die Fachgeschäfte von der Auslage von Mustern in Schüttkörben abzuhalten (Versand im September 1996).

4. Sitzung vom 23. Oktober 1996

- Genehmigung des ersten Tätigkeitsberichtes des Panels *)
 - Genehmigung der Pressemitteilung von Anfang Oktober *)
 - Kenntnisnahme der definitiven Fassung der Kommentare und Beschlüsse zu den die Schweiz betreffenden Punkte der IBFAN-Liste "Breaking the Rules"
 - Kenntnisnahme vom Aussand des Briefes an die Drogerien und Apotheken
 - Diskussion der Liste der zulässigen Fachzeitschriften und Publikationen (gemäss Ziff. 3.3 des Codex); erneute Beratung an nächster Sitzung
 - Behandlung einzelner Beanstandungsfälle
- *) Auf dem Korrespondenzweg bereinigt.

5. Sitzung vom 26. März 1997

- Provisorische Bereinigung der Liste der zulässigen Fachzeitschriften

- Anwendbarkeit der Ziff. 3.1 und 3.2 des Verhaltenscodex auf Inserate und redaktionelle Texte in diesen Zeitschriften: Die inhaltliche Gestaltung der Inserate und die jeweils zum Thema der Inserate passenden redaktionellen Beiträge dürfen die Schwangere und Stillende nicht verunsichern. Die Codex-Bestimmungen gelten sowohl für Inserate als auch für die den betreffenden Medien zur Verfügung gestellten Presstexte. Die unterschwellige, verdeckte Herabsetzung der Muttermilch und/oder des vollen Stillens während der ersten 4 - 6 Monate ist zu unterlassen ("wenn sie zu wenig Milch haben ...", "Ihr Bébé braucht mehr von ...").

6. Sitzung vom 29. Oktober 1997

- Liste der für die Media-Werbung zulässigen Publikationen (vgl. Anhang):
Die Publikation "Baby-Planet" wird in der aktuellen Form nicht auf die Liste der zulässigen Publikationen aufgenommen. Den Herstellern wird nahe gelegt, allenfalls für 1998 bereits bestellten Inserateraum für andere Produkte als Anfangsnahrungen zu verwenden.

Hauszeitungen von Reformhäusern werden einem offenen Kundenkreis zugestellt und gelten somit als Publikumszeitschriften (Werbung für Säuglingsanfangsnahrungen nicht zulässig).
- In Ernährungsinformationen (Ernährungsschemas) ist das Stillen an erster Stelle zu erwähnen (ab Geburt bis 4 - 6 Monate).
- Die Werbung für Produktelinien in kanalbezogenen Zeitungen (z.B. Coop-Zeitung, "Brückenbauer") oder Kanalinseraten liegt in der Kompetenz des Handels. Die Hersteller versuchen auf die Handelspartner einzuwirken, damit auf die Bewerbung von Anfangsmilchen verzichtet wird (Aussprache mit Vertretern der Grossverteilerorganisationen anlässlich der nächsten Sitzung des Panels).
- In stillfreundlichen Kliniken dürfen Ratgeber (z.B. "Baby-Guide" nicht abgegeben werden, sofern diese Werbung für Anfangsmilchen enthalten. Der Entscheid über einen Verzicht auf derartige Werbung liegt bei den Herausgebern.
- Firma Holle Nahrungsmittel AG: Die Vertreter der UNICEF-Arbeitsgruppe prüfen die neuen Packungsdeklarationen und das Werbematerial der Firma Holle Nahrungsmittel AG. Diese ist zu einer nächsten Panel-Sitzung einzuladen.
- Firma Bimbosan AG: Die Packungen und das Werbematerial der Firma Bimbosan AG werden anfangs 1998 im Lichte der revidierten LMV, der SGP-Richtlinien und des Codex überprüft.
- Die vorliegende Beschlussammlung wird vorderhand chronologisch weitergeführt und soll Ende 1998 thematisch gegliedert werden.

7. Sitzung vom 29. April 1998

Aussprache mit den Grossverteilerorganisationen:

- Migros und Coop erklären ihr Engagement für die Einhaltung des Verhaltenscodex.
- Das Codex-Panel soll Anlaufstelle für allfällige Beanstandungen sein; bei Bedarf nehmen die Grossverteilerorganisationen an Sitzungen teil.
- Kanalbezogene Werbung bei Neueinführungen (maximal zwei Publikationen) gilt als zulässig, die Regelung gemäss Ziff. 3.3 und Ausführungsbestimmungen wird als richtig und ausreichend beurteilt.
- Die Grossverteilerorganisationen können Inserate vorgängig der Publikation zur Begutachtung an die UNICEF-Arbeitsgruppe einreichen.
- Die Grossverteilerorganisationen stellen von jedem Inserat, in welchem Säuglingsanfangsnahrungen erwähnt sind, ein Exemplar der UNICEF-Arbeitsgruppe zu.

Aussprache mit der Firma Holle-Nährmittel AG:

- Die Firma Holle Nährmittel AG nimmt von diversen Kritikpunkten zu ihrer Werbebroschüre Kenntnis und wird diesen bei einem Neudruck Rechnung tragen.

Weitere Beschlüsse:

- Die Produkte der Firma Bimbosan AG weichen in verschiedenen Punkten von den LMV-Bestimmungen ab; der Verhaltenscodex wird nicht respektiert.
- Die "Vereinigung Diät" erstellt bis zur nächsten Sitzung eine Übersicht über die LMV- und Codex-Verletzungen.
- Der SGP wird empfohlen, die Produkte der Firma Bimbosan AG nicht in die Liste im Anhang zu den Ernährungsempfehlungen aufzunehmen.
- Aufnahme der Firma Vivosan AG (bzw. Hipp GmbH) in den Panel, vorbehaltlich einer Mitgliedschaft in der "Vereinigung Diät".
- Die UNICEF-Arbeitsgruppe zur Förderung des Stillens erwägt eine Einstellung ihrer Aktivitäten (und der Mitarbeit im Panel) sofern sie für die Stillförderungsbestrebungen keine finanzielle Unterstützung erhält.

8. Sitzung vom 27. Oktober 1998

- Bimbosan AG:

Eine Delegation des Panels wird beauftragt, das Werbematerial und die Packungen mit der Firma Bimbosan AG zu besprechen und Korrekturen im Sinne der Codex- und LMV-Konformität zu erwirken.

- Gratislieferungen an Kliniken, Kontrolle:

Das Panel strebt einfache, wirkungsvolle Kontrollmöglichkeiten zur Überwachung der Fakturierung an die Spitäler an. Es werden geprüft:

- Schreiben der UNICEF-Arbeitsgruppe an alle Geburtskliniken (Feststellen der verantwortlichen Person/Abteilung; schriftliche Bestätigung betreffend Bezahlung der Originalware; Erhebung der Menge).
- Kontrollinstrumente bei den Firmen (Listen der belieferten Kliniken, gelieferte Mengen Originalware und angeforderte Muster).

- Tees für Säuglinge:

- Verzicht auf Altersindikationen bei Indikationstees (IKS-bewilligte und andere).
- Ausarbeitung einheitlicher Hinweise (das Panel erhofft sich entsprechende Empfehlungen seitens der Ernährungskommission der SGP).

- Spezialnahrungen bei Durchfall und Aufstossen:

Die Hersteller ergänzen die Packungen mit einem Hinweis, dass derartige Spezialnahrungen nur für "nicht gestillte Säuglinge" angezeigt sind.

- Hipp-Produkte / Altersindikationen auf Beikostnahrungen:

Die Umstellung auf "nach 4 Monaten" ist für Produktionen im Verlaufe des Jahres 1997 erfolgt (auch für Fachhandel).

- Muster zur Selbstbedienung in Apotheken / Drogerien:

Die Hersteller werden aufgefordert,

- die Abgabe von Mustern restriktiv zu handhaben
- den Aussendienst Anweisung zu erteilen, zur freien Bedienung aufgelegte Muster zu entfernen
- die Apotheker/Drogisten im Gespräch auf die Empfehlungen des Panels aufmerksam zu machen.

- Bestellkarten der Firma Wander AG für Geschenkartikel/Säuglingsanfangsnahrungen:

Die Firma Wander AG prüft die z.Z. verwendete Bestellkarte.

- Eingabe GIFA an BAG vom 2. Oktober 1998:

- Frau A. Lappé und Fürsprecher B. Hodler werden beauftragt, die Geschenkkoffer "Felicitas" und "Present Service" sowie die Aussände der Firmen auf Codex-Konformität zu prüfen.
- Bestätigungsschreiben an Direktion BAG mit Rückweisung der Vorwürfe bezüglich "geheimer" Arbeitsweise des Panels.
- Durchführung einer Medienkonferenz zwecks Information über die Tätigkeit des Panels (ev. 11. Dezember 1998).

- Fussballturnier "Milupa Cup":

Die Firma Milupa SA informiert, die UNICEF-Arbeitsgruppe über Ausschreibung, Programm, Aktivitäten etc.

* * *

(Note: back translation of items from the minutes of 1998 meetings of the Swiss Codex Panel. These minutes verify - on a regular basis - that the companies which have signed the Swiss Code of Conduct, including Nestlé, comply to the letter and the spirit of the Code and that all complaints which have come up during the existence of the panel could be settled by mutual agreement.)

7. Meeting 29 April, 1998

Discussions with Mass Merchandisers

- Migros and Coop express their commitment to comply with the code of good conduct.
- The Codex Panel should be the reference for any possible complaints: if need be, the large distributors will participate in the meetings.
- Channel-related publicity of new introductions (max.2 publications) is tolerated, the regulation in accordance with Clause 3.3 and the requirements for execution being correctly and satisfactorily interpreted.
- Mass merchandising organisations may submit advertisements to the UNICEF Work Group prior to publication for assessment.
- Mass merchandisers shall deliver a sample of each advertisement concerning infant formulas to the UNICEF Work Group.

Discussion with Holle Nahrungsmittel AG

- Holle Nahrungsmittel acknowledged various criticisms of their advertising brochure and will effect corrections in a new edition.

Other Conclusions

- Bimbosan AG products do not comply with LMV requirements in various points: the code of conduct is not respected.
- The "Dietary Association" shall draw up a review of LMV and Codex violations for the next meeting.
- The SPG shall recommend that Bimbosan AG products are not included in the list accompanying the nutrition recommendations.
- Vivosan AG (i.e. Hipp GmbH) has been admitted to the Panel, subject to membership in the "Dietary Association".

- The UNICEF Work Group for the Promotion of Breast-Feeding is considering an introduction of their activities (and co-operating with the Panel) provided that they receive no financial support for efforts to encourage breast-feeding.

8. 27 October, 1998 Meeting

Bimbosan AG:

- A delegation from the Panel will be appointed to review publicity and packaging material with Bimbosan and obtain corrective measures to bring them in line with Codex and LMV compliance.

Free samples to clinics – Monitoring

The Panel is seeking simple, effective manners of controlling the monitoring of billing of hospitals. The following will be checked:

- Written UNICEF Work Group documentation to all maternity clinics (determine responsible person/department; written acknowledgement of relevant payment for manufactured goods; enquiries re. quantities).
- Control tools at company level (lists of clinics supplied, quantities of manufactured goods and promotional samples delivered).

Teas for Infants

- Waiver of age indications for prescribed teas (IKS-authorized and others)
- Drawing up detailed indications (the Panel is hoping for pertinent recommendations from the SGP Nutrition Commission).

- Special nutrition for diarrhea and flatulence

- The manufacturer should complete information on packaging with an indication that the special nutrition in question is "not for breast-feeding infants".

- Hipp products / indication of age on complementary nutrition

The adjustment to "from 4 months" is effective for products during 1997 (also for specialised shops).

- Self-service samples available in pharmacies and drug stores

Manufacturers have been requested:

- to limit donations of samples
- external services to issue instructions that samples be removed from self-service displays.
- to make chemists and drugstore employees aware of the discussion about the Panel's recommendations

- Wander AG Order forms for gift articles/infant starting foods

Wander AG is checking the current order forms.

- GIFA input to BAG on October 2, 1998

- Mrs .A. Lappe and spokesperson B. Hodler were instructed to check the "Felicitas" and "Present Service" gift boxes as well as the companies' exhibition stands for code compliance.
- Confirmation in writing to BAG management rejecting the accusations of the Panel's "secretive" working methods.
- Holding a press conference to inform the public of the Panel's purpose and work.

- "Milupa Cup" Football tour

Milupa S.A. inform the UNICEF Work Group about their advertising, program, activities and so on.



Nestlé Danmark A/S

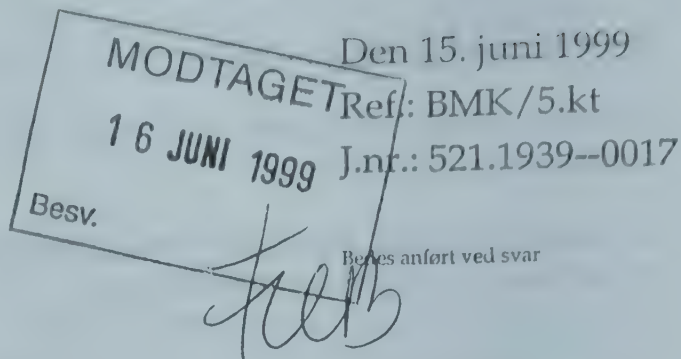
P. O. Boks 890

Amerikakaj

Dampfærgevej 28

DK- 2100 København Ø

Attention F. W. Brandt



Vedrørende regler for markedsføring af modernælkserstatninger I Danmark

Som svar på Nestlés brev af 26. april 1999 kan Veterinær- og Fødevaredirektoratet oplyse, at direktoratet har implementeret Kommissionens direktiv nr. 91/321/EØF af 14. maj 1991 som ændret ved Kommissionens direktiv nr. 96/4/EF i bekendtgørelse nr. 202 af 17. marts 1997 om modernælkserstatninger og tilskudsblandinger til spædbørn og småbørn. Dermed er de principper og målsætninger fra den internationale markedsføringskode, som blev vedtaget på Verdenssundhedsorganisationens 34. generalforsamling, med hensyn til markedsføring af modernælkserstatninger blevet gældende dansk lovgivning.

Det offentlige fødevarekontrollsystem påser løbende, at lovgivningen overholdes.

Med venlig hilsen

Bente Koch

☒ Rolighedsvej 25
DK-1958 Frederiksberg C

☐ Mørkhøj Bygade 19
DK-2860 Søborg

Tlf: +45 33 95 60 00
Fax: +45 33 95 60 01

Internet: www.vfd.dk
e-post: vfd@vfd.dk

Ministry of Food, Agriculture and Fisheries
Danish Veterinary and Food Administration

Nestlé Denmark A/S
P.O. Boks 890
DK-2100 Copenhagen

15 June 1999.

Concerning regulations for the marketing of breast-milk substitutes in Denmark

In answer to Nestlé's letter of 26 April 1999, the Veterinary and Food Administration can advise that the Administration has implemented the EC Directive No. 91/321 of 14 May 1991, as amended by the Commission's Directive No. 96/4 EC, in circular No. 202 of 17 March 1997, concerning breast-milk substitutes and complementary foods for infants and young children. Thereby, the principles and aim of the International Code of Marketing of Breast-milk Substitutes, which was adopted by the World Health Organisation at the 34th General Assembly, have been integrated into Danish law.

The ongoing food control system is currently supervising that the law is being respected.

Yours truly,

Bente Koch

E 4/213/99

April 1 1999

Ms. Gunnel Schauman
Managing Director

Suomen Nestle'Oy
PI 80
02201 ESPOO

Ref. Your letter dated April 1 1999

Marketing of Infant Formula

The Finnish Government has implemented the principles and objectives of the International Code of Marketing of Breast Milk Substitutes, as adopted at the 34th World Health Assembly, through the Decision of the Ministry of Health and Welfare 807/1994, issued August 25 1994.

National Food Administration, as the authority responsible for the control according the Food Law 361/1995, hereby confirms that to our best knowledge the marketing practices concerning Infant Formula of Suomen Nestle'Oy are in accordance with the above mentioned Decision 807/1994.

Director


Kalevi Salminen

Legal Adviser


Kirsi Hannula



STATENS HELSETILSYN

KONTOR: CALMEYERS GATE 1 - TELEFONER 22 24 88 88 22 24 90 90 - TELEFAKS 22 24 95 90
POSTADRESSE: POSTBOKS 8128 DEP, 0032 OSLO

Adm. direktør Lennart Svensson
A/S Nestle Norge
Postboks 595
1301 Sandvika

DERES REF.

VÅR REF. (BES OPPGITT VED SVAR)
99/1255 1 SGD/-

DATO
30. april 1999

AVTALE MELLOM NORSK BARNEMATINDUSTRI OG HELSEDIREKTORATET OM MARKEDSFØRING AV MORSMELKERSTATNINGER

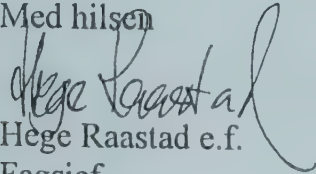
Det vises til Deres brev av 09.03.1999 hvor De ber om Statens helsetilsyns oppfatning av om Nestlè Norge følger den nasjonale overenskomsten.

Avtalen mellom norsk barnematindustri og det daværende Helsedirektoratet ble som kjent inngått i 1983.

I artikkel 11a – 11.1, som handler om gjennomføring og overvåkning i den frivillige avtalen, står det at ”produsenter av produkter som omfattes av denne kode, WHO koden, er selv ansvarlig for at deres markedsføringspraksis er i overensstemmelse med koden.”

Helsetilsynet har ikke opplysninger som kunne tyde på at Nestlè ikke overholder avtalen.

Med hilsen


Hege Raastad e.f.
Fagsjef


Solveig Gedde-Dahl
rådgiver

Kopi: Statens råd for ernæring og fysisk aktivitet.

Saksbehandler: Solveig Gedde-Dahl, tlf.: 22 24 90 28

The National Health Supervision

A/S Nestle Norge
Postboks 595
1301 Sandvika

30 April 1999.

AGREEMENT BETWEEN NORWEGIAN BABY FOOD INDUSTRY AND THE MINISTRY OF HEALTH CONCERNING MARKETING OF BREAST-MILK SUBSTITUTES

Ref. your letter of 9 March in which you request the Ministry's opinion whether Nestlé Norway is following the national agreement.

The agreement between the Norwegian Baby Food Industry and the, at the time called, Health Directorate, was, as you know, made in 1983.

In Article 11a-11.1, which deals with the execution and supervision of the voluntary agreement, it is stated that "manufacturers of products which are covered by this code, the WHO Code, are themselves responsible that their marketing practices be conform with the Code".

The Health Supervision has no information leading to believe that Nestlé does not comply with this agreement.

Hege Raastad
Director

Gedde-Dahl
Counsellor

